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16th *AUTHORISED EDITION.*

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# Dr. CHAVASSE'S Advice to a Wife

*On the Management of her own  
Health.*

REVISED by

TANLEY DODD, M.B., F.R.C.S.

*Assistant Obstetric Physician, Westminster Hospital.*

J. & A. CHURCHILL,  
10, GREAT MARLBOROUGH STREET, LONDON.

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# Dr. PYE H. CHAVASSE'S

*Opinion of*

## ROBINSON'S

# Patent Barley.

*Question 42 :—*

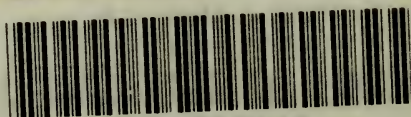
In the event of a Mother being totally unable to feed her infant, what artificial food would you recommend?

The best artificial food, in my opinion, is one composed of Cow's Milk and

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*"PATENT"*  
**BARLEY.**

The Patent Barley is to be mixed with warm water to the consistency of milk and then added to cold milk, and given through the bottle. I begin with one fourth of milk to three fourths of Barley; decreasing the proportion of Barley and increasing the milk as the infant grows, and so continue until its stomach can digest all milk. This food is well-known to many old nurses. Children apparently dying from starvation, soon after taking it, quickly pick up flesh, their bodies fill out, they sleep, they lose all pain about the bowels, and motions previously offensive, green and irritating, become sweet and healthy.

*The above appeared for many years in each yearly edition of 10,000 copies of*



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# CHAVASSE'S

## ADVICE TO A WIFE

ON THE MANAGEMENT OF HER OWN HEALTH  
AND ON THE TREATMENT OF SOME OF THE  
COMPLAINTS INCIDENTAL TO PREGNANCY  
LABOUR, AND SUCKLING

SIXTEENTH EDITION

REVISED BY

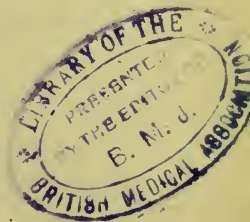
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## PREFACE.

—:O:—

A new edition of this work needs no apology as the constant demand for it shows that it is fulfilling a want which does not diminish with succeeding generations.

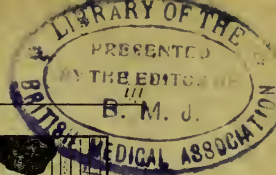
The work is kept to a great extent in the original style of the author, but a great deal of repetition is eliminated, and the book made more compact. Many of the quotations which are apt and instructing, and without which the work would lose much of its originality, have been retained.

The instruction in this work is intended to guide the lay reader, and not to act as a substitute for medical attendance when such can be readily obtained, and the chapters for the guidance of the lay reader on labour and the care of the lying-in woman, are not intended to take the place of the medical man, but in an emergency to place as clearly as possible before the lay person the methods whereby danger may be averted.

The methods of resuscitating the new-born have been amplified ; the subjects of treatment and diet have been revised and brought into line with modern views, and a section on sexual hygiene has been added.

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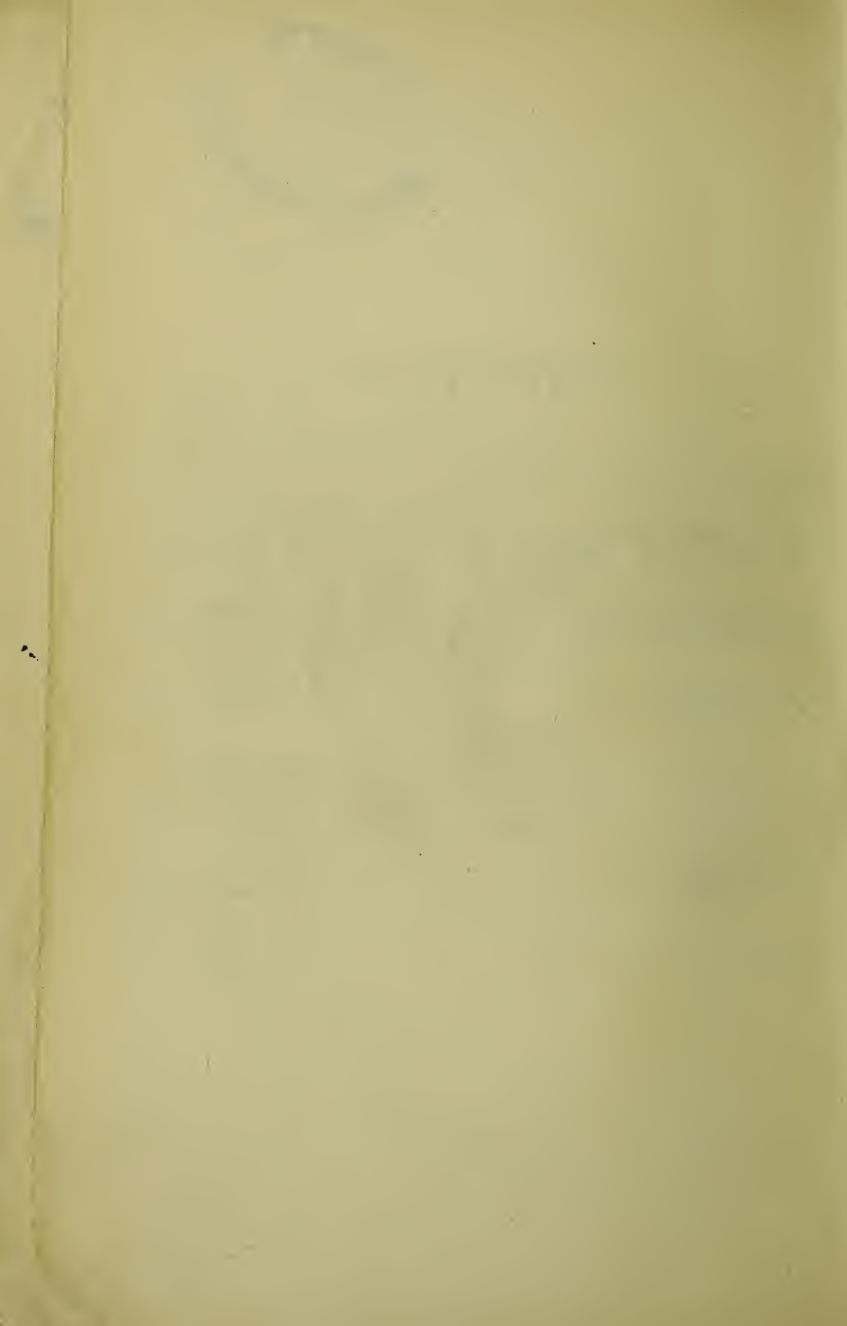
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# ADVICE TO A WIFE.

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## INTRODUCTORY CHAPTER

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*A good wife is heaven's last, best gift to man—his angel and minister of graces innumerable—his gem of many virtues—his casket of jewels :—her voice is sweet music—her smiles, his brightest day—her kiss, the guardian of his innocence—her arms, the pale of his safety, the balm of his health, the balsam of his life—her industry, his surest wealth—her economy, his safest steward—her lips, his faithful counsellors—her bosom, the softest pillow of his cares—and her prayers, the ablest advocate of Heaven's blessings on his head.—JEREMY TAYLOR.*

*A guardian angel o'er his life presiding  
Doubling his pleasures and his cares dividing.*

ROGERS

*Of earthly goods the best is a good Wife ;  
A bad, the bitterest curse of human life.*

SIMONIDES.

It may be well—before I enter on the subjects of menstruation, pregnancy, labour, and suckling—to offer a few preliminary observations, especially addressed to a Young Wife.

My subject is Health—the care, the restoration, and the preservation of health—one of the most

momentous themes that can be brought before a human being, one that should engross much of our time and of our attention, and one that unless it be properly inquired into and attended to, cannot be secured. The human frame is, as every one knows, constantly liable to be out of order; it would be strange, indeed, if a beautiful and complex instrument like the human body were not occasionally out of tune—

“Strange that a harp of thousand strings  
Should keep in tune so long.”—*Watts*.

The advice I am about to offer to my fair reader is of the greatest importance, and demands her deepest attention. How many wives are there with broken health, with feeble constitutions, and with childless homes! Their number is legion! It is painful to contemplate that in our country there are so many unhealthy wives. There must surely be numerous causes for such a state of things! A woman, born with every perfection, to be full of bodily infirmities! It was ordained by the Almighty that wives should be fruitful and multiply! Surely there must be something wrong in the present system if they do not do so! In the following pages it will be my object to point out many of the causes of so much ill-health among wives—ill-health that sometimes leads to barrenness—and to suggest remedies both for the prevention and for the cure of such conditions.

It is an astounding and lamentable fact that about one out of ten—that ten per cent. of all the wives of England are barren—are childless! It is possible that some of this ten per cent. might be made fruitful, provided a more judicious plan of procedure than is at present pursued were adopted. My anxious endeavours, in the following pages, will be to point out remedies for the evil, and to lay down rules—rules which, I hope, my fair reader will strenuously follow.

My theme, then, is Health—the Health of Wives—and the object I shall constantly have in view will be the best means both of preserving it and of restoring it when lost. By making a wife strong, she will not only, in the majority of cases be made fruitful, but capable of bringing *healthy* children into the world. This latter inducement is of great importance; for puny children are not only an anxiety to their parents, but a misery to themselves, and a trouble to all around! Besides, it is the children of England that are to be her future men and women—her glory and her greatness! How desirable it is, then, that her children should be hardy and strong.

A wife may be likened to a fruit-tree, a child to its fruit. We all know that it is as impossible to have fine fruit from an unhealthy tree as to have a fine child from an unhealthy mother. In the one case, the tree either does not bear fruit at all—is

barren, or it bears under-sized, tasteless fruit—fruit which often either immaturally drops from the tree,\* or if plucked from the tree, is useless; in the other case, the wife either does not bear children—she is barren, or she has frequent miscarriages, “untimely fruit”—or she bears puny, sickly children, who often either drop into an early grave, or, if they live, probably drag out a miserable existence. As a rule you may as well expect “to gather grapes

\* “The weakest kind of fruit ”

Drops earliest to the ground.”—*Shakespeare*.

of thorns or figs of thistles,” as healthy children from unhealthy parents! Unhealthy parents, then, often have unhealthy children; this should deter both man and woman so circumstanced from marrying. There are numerous other complaints besides consumption and insanity, inherited and propagated by parents. It is a fearful responsibility both to men and women, if they be not healthy, to marry. The result must, as a matter of course, be misery! How many a poor unfortunate child may, with anguish of soul, truly exclaim, “Behold, I was shapen in wickedness, and in sin hath my mother conceived me!”—*The Psalms*.

If a wife is to be healthy and strong, she must use the means—she must sow the seeds of health before she can reap a full harvest of health; health will not come by merely wishing for it. The means are not always at first pleasant; but, like

many other things, habit makes them so. Early retiring to rest and early rising, for instance, are not agreeable to the lazy or to those fond of bed; but they are an assistance to sound health, and are in the end a pleasure. Exercise is troublesome to the indolent; but no woman can be really strong without it, and exercise becomes, after a time, a pastime. Thorough ablution of the whole body is distasteful to one not accustomed to much washing—to one labouring under a kind of hydrophobia; but there is no perfect health without the *daily* cleansing of the *whole* skin, and after a short period, thorough ablution becomes a luxury. But all these processes entail trouble. True; is anything in this world to be done without trouble? and is not the acquisition of precious health worth trouble? Yes, it is worth more than all our other acquisitions put together! Life without health is a burden; life with health is a joy and gladness! Up, then, and arouse yourself, and be doing; for life is no child's play—

“Life is real! life is earnest.”—*Longfellow*.

No time is to be lost if you wish to be well, to be a mother, and to be a mother of healthy children. The misfortune of it is, many ladies are more than half-a-sleep, and are not aroused to danger until danger stares them in the face: when danger does show itself, they are like a startled hare—full of fears; they are not cognisant of ill-health

slowly creeping upon them, until, in too many cases, the time is gone by for relief, and ill-health has become confirmed—has become a part and parcel of themselves; they do not lock the stable until the steed be stolen; they do not use the means until the means are of no avail—

“A sacred burden is this life ye bear,  
Look on it, lift it, bear it solemnly,  
Stand up and walk beneath it steadfastly.  
Fail not for sorrow, falter not for sin,  
But onward, upward, till the goal ye win.”

*F. A. Kemble.*

Idleness is the mother of many diseases; she breeds them; feeds them, and fosters them. Idleness makes people miserable. I have heard a young girl, surrounded with every luxury, bemoan her lot, and complain that she was most unhappy in consequence of not having anything to do, and who wished that she had been a servant, so that she might have been obliged to work for her living. Idleness is certainly the hardest work in the world.

It frequently happens that a lady, surrounded with every luxury and every comfort, drags out a miserable existence; she cannot say that she ever, even for a single day, really feels well and strong.

If a person be in perfect health, the very act of living is itself true happiness and thorough enjoyment, the greatest this world can ever bestow. How needful it therefore is that all necessary in-



struction should be imparted to every Young Wife, and that proper means should, in every way, be used to ensure health!

The judicious spending of the first year of married life is of the greatest importance in the making and in the strengthening of a wife's constitution, and in preparing her for having a family. How sad it is then, that it is the first twelve months which, as a rule, are especially chosen to mar and ruin her own health, and perhaps to make her childless! The present fashionable system of spending the first few months of married life in a round of visiting, of late hours, and in close and heated rooms, calls loudly for a change. How many valuable lives have been sacrificed to such a custom! How many miscarriages, premature births, and still-born children, have resulted therefrom! How many homes have been made childless—desolate—by it! Time it is that common sense should take the place of such folly! The present system is bad, is rotten to the core, and is fraught with the greatest danger to human life and human happiness. How often a lady, during the first year of her wifehood, is gadding out night after night—one evening to a dinner party, the next night to private theatricals, the third to an evening party, the fourth to the theatre, the fifth to a ball, the sixth to a concert, until, in some cases, every night is consumed in this way

—coming home frequently in the small hours of the morning, through damp or fog, or rain or snow, flushed and excited, too tired until the morning to sleep, when she should be up, out, and about. When the morning dawns she falls into a heavy, unrefreshing slumber, and wakes not until noon, tired and unfit for the duties of the day! Night after night—crowded rooms, carbonic acid gas, late hours, wine, “bridge,” and excitement are her portion. As long as such a plan is adopted the preacher preacheth but in vain. Night after night, week after week, month after month, this game is carried on, until at length either an illness or broken health supervenes. Surely these are not the best means to ensure health and a family, and healthy progeny! The fact is, a wife nowadays is too artificial; she lives on excitement; it is like drinking no wine but champagne, and like champagne taken in excess, it soon plays sad havoc with her constitution. The pure and exquisite enjoyments of nature are with her too commonplace, tame, low, and vulgar. How little does such a wife know of the domestic happiness so graphically and sweetly described by that poet of the affections, Cowper—

“ Fireside enjoyments, home-born happiness  
And all the comforts that the lowly roof  
Of undisturb'd retirement, and the hours  
Of long uninterrupted evening, know.”

A fashionable lady might say, "I cannot give up fashionable amusements! I must enjoy myself as others do; I might as well be out of the world as out of the fashion." To such a one I reply, "I myself am not a fashionist—it is not in my line; and as in the following pages I have to tell some plain unvarnished truths, my advice to you is, close this book at once, and read no more of it, as such a work as this cannot be of the slightest use to you, however it might be to one who values health 'as a jewel of great price'—as one of her most precious earthly possessions." Really the subject is assuming such a serious aspect that it behoves a medical man to speak out plainly and unreservedly, and to call things by their right names. Fashion is oftentimes but another name for suicide, and for baby-slaughter—for "massacre of the innocents!" Heaven help the poor unfortunate little child whose mother is a votary of fashion, who spends her time in a round and whirl of fashionable life, and leaves her child to the tender mercies of servants, who "gang their ain gait," and leave their little charge to do the same. Such a mother is more unnatural than a wild beast; for a wild beast, as a rule, is gentle, tender, and attentive to its offspring, scarcely ever for a moment allowing its young to be out of its sight. Truly, fashionable life deadens the feelings and affections. I am

quite aware that what I have just now written will, by many fashionable ladies, be pooh-poohed, and be passed by as "the idle wind." They love their pleasures far above either their own or their children's health, and will not allow anything, however precious, to interfere with them; but still I have confidence that many of my judicious readers will see the truth and justness of my remarks, and will profit by them.

A French poet once sung that a house without a child is like a garden without a flower, or like a cage without a bird. The love of offspring is one of the strongest instincts implanted in woman; there is nothing that will compensate for the want of children. A wife yearns for them; they are as necessary to her happiness as the food she eats, and as the air she breathes. If this be true—which, I think, cannot be gainsaid—how important is our subject—one of the most important that can in this world engage one's attention, requiring deep consideration and earnest study.

The first year of a married woman's life may determine whether, for the remainder of her existence, she shall be healthy and strong, or shall be delicate and weak; whether she shall be the mother of fine, healthy children, or—if, indeed, she be a mother at all—of sickly, undersized offspring—

"Born but to weep, and destined to sustain  
A youth of wretchedness, an age of pain"—*Roscoe*,

If she be not a parent, her mission in life will be only half performed, and she will be robbed of the greatest happiness this world can afford. The delight of a mother, on first calling a child her own, is exquisite, and is beautifully expressed in the following lines

"He was my ain, and dear to me  
As the heather-bell to the honey-bee,  
Or the braird to the mountain hare."—*Good Words*.

I should recommend a young wife to remember the momentous mission she has to fulfil; to ponder on the importance of bringing *healthy* children into the world; to bear in mind the high duties that she owes herself, her husband, her children, and society; to consider well the value of health. "The first wealth," says Emerson, "is health"; and never to forget that "life has its duties ever."  
*Douglas Jerrold*.

If she has not been in the habit of doing so before marriage, a young married lady ought at once to commence taking regular and systematic *out-door exercise*, which might be done without in the least interfering with her household duties. There are few things more conducive to health than walking exercise; and one advantage of our climate is, that there are but few days in the year in which at some period of the day it might not be taken. Exercise should always be taken in pure air. The more exercise you take, the

more air you inhale, therefore the more important is it that the air should be pure. Indeed inhalations of pure air cleanse the air cells of the lungs and oxygenate the blood. Walking—I mean a walk, not a stroll—is a glorious exercise: it expands the chest and throws back the shoulders; it strengthens the muscles; it promotes digestion, making a person digest almost any kind of food; it tends to open the bowels, and is better than any aperient pill ever invented; it clears the complexion, giving roses to the cheeks, and brilliancy to the eyes, and, in point of fact, is one of the greatest beautifiers in the world. It exhilarates the spirits like a glass of champagne, but, unlike champagne, it never leaves a headache behind. If ladies would walk more than they do, there would be fewer lackadaisical, useless, complaining wives than there are at present; and instead of having a race of puny children, we should have a race of giants. Walking exercise is worthy of all commendation, and is indispensable to contentment, health, strength and comeliness. Of course, if a lady be pregnant, walking must then be cautiously pursued; but still walking in moderation is even then absolutely necessary, and tends to keep off many of the wretchedly depressing symptoms, often, especially in a first pregnancy, accompanying that state. I am quite sure that there is nothing more conducive to health than the wearing out of lots of shoe-leather, and leather is cheaper than physic.



Walking is even more necessary in the winter than in the summer. If the day be cold, and the roads be dirty, provided it be dry above, I should advise my fair reader to put on thick boots and warm clothing, and to brave the weather. Even if there be a little rain and much wind, if she be well wrapped up, neither the rain nor the wind will harm her. A little sprinkling of rain, provided the rules of health be followed, will not give her cold. Much wind will not blow her away. She must, if she wishes to be strong, fight against it; the conflict will bring the colour to her cheek and beauty to her eye.

Moreover, there is not a greater beautifier in the world than fresh air and exercise; a lady who lives half her time in the open air—in God's sunshine—and who takes plenty of exercise, has generally a clear and beautiful complexion—

"She looks as clear

As morning roses newly washed with dew."

*Shakespeare.*

Do not let me be misunderstood: I am not advocating that a delicate lady, unaccustomed to exercise, should at once take violent and long-continued exercise. Certainly, not! Let a delicate lady *learn* to take exercise, as a young child would *learn* to walk—by degrees; let her creep, and then go; let her gradually increase her exercise,

and let her do nothing either rashly or unadvisedly. If a child attempted to run before he could walk, he would stumble and fall. A delicate lady requires just as much care in the training to take exercise as a child does in the learning to walk; but exercise must be learned and must be practised if a lady, or anyone else, is to be healthy and strong. Fortunately, in this our day, the importance of exercise as a means of health is better understood than formerly. Standing is not exercise. It spells fatigue. The human body is not so constructed as to adapt it to standing. Long-continued standing gives rise to congestion in the veins of the legs, and thus prepares the way for varicose veins. Loitering about, therefore, and standing are things to avoid. Nature points out this fact by providing birds who stand, such as herons, ibis, and ostriches, with long legs devoid of muscles and blood-vessels. They consist almost entirely of bone, tendon and sinews.

Sitting over the fire all day will make her chilly, nervous, dyspeptic, and dispirited. It will cause her to be more chilly, and thus will make her more susceptible of catching cold; and it will frequently produce chilblains. If she be cold, the constant sitting over the fire will only warm her for the time, and will make her feel more starved when she leaves it.

There is nothing like a long walk to warm the

body and to make the blood course merrily through the blood vessels. I consider it to be a great misfortune that some of my fair countrywomen do not use their legs more and their carriages less. Walking, although it is the primary, and perhaps the most health-giving of all exercises, is nowadays by no means the only resource for women. Bicycling, horse-riding, tennis, golf, and for young women cricket and hockey, deservedly hold a high position, and are every year becoming more popular. Swimming, rowing, and punting are also most useful adjuncts to the athletic training of women.

The dangers to avoid in bicycling are riding too fast, and too far, and too much up-hill. Here the Italian adage, "*chi va piano, va sano, e chi va sano, va lontano*," is the key to the situation. Gently does it. *Plus fait douceur que violence*. With this proviso, I have no hesitation in saying that the bicycle is a source of health and pleasure to thousands.

Of lawn tennis the same principle holds good as in bicycling—take things easily; a lady should so play as not to exhaust herself.

Golf is a perfect game for women; here they can walk at their own pace, in fresh air. At golf they may "drive" as they like, no harm results. Their lungs are filled with fresh air, their shoulders expanded. They tread lightly the verdant pasture

land. Nothing in the way of healthful exercise, incited by an object in view, is to compare with golf.

Horse-riding is a splendid form of exercise. Unfortunately it is beyond the means of the majority of women in this country. It has been stated that much horse, or bicycle riding tends to prolong labour, by making the lower part of the passage through which the child has to pass more rigid and unyielding. But even if this be true, the evil effects are very trifling as compared with the immense benefits conferred on the general health.

Motoring is an excellent way of getting fresh air, but it can never be a substitute for exercise, except, perhaps, when the lady acts as her own driver.

Unfortunately this is an age of luxury. Everything is artificial, and disease and weakness, and even barrenness, follow as a matter of course. In proof of my assertion that this is an age of luxury, look at the present sumptuous style of living: carriages and motor-cars rolling about in every direction; dining-tables groaning under the weight of rich dinners, and expensive wines flowing like water; grand dresses sweeping the streets almost doing away with the necessity for scavengers. I say, advisedly, *streets*, for *green fields* are unfortunately all too seldom visited by some ladies of fashion. We are almost in extravagance rivalling ancient

Rome, just before luxury sapped her strength and laid her in ruins!

If a lady has to travel half a mile she must have her carriage or motor-car. Strange infatuation! Is she not aware that she has hundreds of muscles that want exercising? that she has lungs that require expanding? that she has nerves that demand bracing? that she has blood that needs circulating? And how does she think that the muscles can be exercised, that the lungs can be expanded, that the nerves can be braced, and that the blood can be properly circulated, unless these are all made to perform their proper functions by an abundance of exercise? It is utterly impossible!

Does she desire to be strong? Then let her take exercise! Does she hope to retain her bloom and her youthful appearance, and still to look charming in the eyes of her husband? Then let her take exercise! Does she wish to banish nervousness and low spirits? Then let her take exercise! There is nothing standing still in Nature—if it were, creation would languish and die!—There is a perpetual motion! And so must we be constantly employed, when not asleep, if we are to be healthy and strong! Nature will not be trifled with; these are her laws—immutable and unchangeable, and we cannot infringe them with impunity.

If a newly-married woman be delicate, as unfortunately, too many are, she may be made to bear exercise well, provided she begin by taking a short walk at first—be it ever so short—and by gradually increasing it, until she be able to take a tolerably long one. She might find it irksome at the beginning, and might be inclined to give it up in despair; but if she value her health and happiness, let me urge her to persevere, and she may depend upon it that she will be amply rewarded for her trouble. And this is true of the other forms of exercise already mentioned—golf, bicycling, etc.

A delicate lady frequently complains of *cold* feet. She often has neither sufficient food nor sufficient exercise to keep them warm. Exercise and plenty of nourishment are the best remedies she can use to warm them. If they be cold before retiring to rest—a frequent cause of keeping her awake—let her walk briskly for half an hour before undressing for the night, about the hall, or the landing, or a large room; or, what is better still, let her have a dance with her husband, or a romp with her children, if she have any. On a cold winter's evening it is much better to be taking gentle exercise round a billiard table than sitting in front of a fire, or playing "bridge."

Cold feet generally indicate a sluggish circulation. In addition to what has been advised, let me sug-



gest a very easy and grateful remedy. With cold feet there is a cold perspiration. Now this perspiration damps the stockings and shoes worn. The feet are, as it were, in a constant cold bath. They cannot get warm. You may burn them and the shoes by almost putting them into the fire, but you will not warm them. Well, the remedy is this—wear woollen stockings or silk stockings, and change them *twice a day*, hanging up the disused pair to dry, and putting on a dry, warm pair instead. The same must be done with the shoes or boots that may be worn.

It should be a rule that ladies who have cold feet should never wear *patent leather* shoes or boots. The reason for this is that as the dampness from the feet cannot pass through the prepared leather—it does fairly well through ordinary leather—the cold moisture is pent up, and this adds to previous troubles.

One reason why my fair countrywomen take so much opening medicine is the want of exercise. How truly it has been said that “physic, for the most part, is nothing else than the substitute of exercise or temperance.” I consider it to be a grievous misfortune for any one—man, woman, or child—who cannot, without the frequent taking of physic, keep their bowels regular. When such is the case there is something wrong, very wrong, about her system and about her proceedings, and

the sooner the matter is enquired into, and altered the better. The necessity of a constant swallowing of opening medicine is a proof of chronic ill-health, and will in time, injure her constitution beyond remedy. I cannot speak too strongly on this subject. I have, in my professional experience seen so much mischief and misery caused by the frequent swallowing of opening pills, that I should not be doing my duty if I did not raise my voice against the bad practice. Why, many ladies make it a rule, during the whole of their lives, to take opening pills two or three times a week! The bowels, they say, will not act without them; but I maintain that if they would resolutely refrain from swallowing them, and adopt the rules of health laid down in these pages, they would often be able altogether to dispense with them, to their great benefit and delectation. But then the rules of health require trouble and perseverance (and what that is worth having does not!), while the swallowing of a couple of pills can be done quickly, and with very little trouble; but although the frequent taking of pills gives at the time but little trouble, they cause much trouble afterwards! Look, then, at the result of each system, and decide accordingly! It has been said that "gluttony kills more than the sword"; my conviction is, that the constant taking of opening medicine kills more than gluttony and the sword combined! The abuse of

aperients is one of the crying evils of the day, and who so proper as a medical man to raise his voice to suppress, or at all events to lessen, the evil? The law of nature is, that relief of the bowels should be as regular a habit as the daily course of the earth round the sun. Neglect of this law is sure to entail general disorder.

If a lady be costive, and is in consequence inclined to take a dose of physic, let me advise her to take instead a long walk, which will, in the majority of cases, do her much more good. If requiring repetition, the one is far more agreeable, and the effects much more likely to be lasting than the other. Exercise, I am quite sure, as a rule, is in the long run much more effectual and beneficial, and agreeable than opening physic!

A newly-married wife ought to be cautious in the taking of horse-exercise, or of any other form of violent exercise. As long as she be *not* pregnant, horse-exercise is very beneficial to health, and is a great enjoyment; but the moment symptoms of pregnancy develop themselves she must instantly give it up, or it may cause her to miscarry.

Let her breathe the pure air of heaven, rather than the close contaminated air either of an assembly or of a concert room. The air of an assembly or of a concert room is contaminated with carbonic acid gas. The breath of numbers of persons gives off carbonic acid gas, which gas is

highly poisonous, unless the ventilation be good. The truth of this assertion is patent to every one who will observe the effects that a large assembly has on the system when the ventilation is inadequate: the headache, the oppression, the confusion of ideas, the loss of appetite, the tired feeling, followed by a restless night—all tell a tale, and loudly proclaim that neither such an assembly, nor concert room, is a fit place for a young wife desirous of having a family.

Let a young married lady attend well to the *ventilation* of her house. She may depend upon it that ventilation, thorough ventilation, will prove one of the best friends she has in the world. Let her give directions to her servant to have early every morning every window in the house opened. For ventilation open your windows both at top and bottom. The fresh air rushes in below while the foul air escapes above. This opening of the window, top and bottom, of course applies only to the rooms that are *unoccupied*: in an *occupied* room in warm weather, the upper sash should be opened. When the upper sash of a window is opened the ventilation is generally efficient.

Let her give orders that every chimney in the house be unstopped; and let her see for herself that her orders have been obeyed; for servants, if they have the chance, will stop up chimneys, as

they are fully aware that dust and dirt will come down chimneys, and that it will give them a little extra work to do. But the mistress has to see to the health of herself and of her household, which is of far more consequence than either a little dirt or extra work for her servants. Let every young wife remember that she requires just as much pure air in the night as in the day; and if she does not have it, her sleep will neither refresh her nor strengthen her, but that she will rise in the morning more weary than on the previous night when she retired to rest.

The way then to make a house healthy, and to keep off disease, is by *thorough ventilation* — by allowing a current of air, both by day and night, to constantly enter and to sweep through the house, and every room of the house. Do not be afraid of open windows. Fortunately, the necessity for open windows and fresh air is better understood in this country now than formerly, except, perhaps, by the lower classes.

Cold air is frequently looked upon as an enemy, instead of being contemplated, as, what it really is to a healthy person, a friend. The effect of cold upon the stomach is well exemplified in a walk in frosty weather, producing an appetite.

Hot and close rooms, soft cushions, and luxurious couches must be eschewed. I have somewhere read, that if a fine, healthy whelp of the bull-dog

species were fed upon chicken, rice, and delicacies, and made to lie upon soft cushions, and if, for some months, he were shut up in a close room, when he grew up he would become unhealthy, weak, and spiritless. So it is with a young married woman; the more she indulges, the more unhealthy, weak, and inanimate she becomes—unfit to perform the duties of a wife and the offices of a mother, if, indeed, she ever be a mother.

Rich and luxurious ladies are less likely to be blessed with a family than poor and hard-worked women. But if the hard-worked be poor in this world's goods, they are often rich in children, and "children are a poor man's riches." Here is, with a vengeance, compensation! Compensation usually deals very justly both to man and womankind. For instance, riches and childlessness, poverty and children, laziness and disease, hard work and health, a hard-earned crust and contentment, a gilded chamber and discontent—

"These are oft-times wedded as man and wife

And linked together, hand in hand, through life.

Riches seldom bring health, contentment, many children, or happiness; they more frequently cause disease, discontent, childlessness, and misery.

Sterility, or barrenness, results in a large number of cases from disorder of the womb. Sometimes a simple surgical operation will cure such sterility, and this is particularly likely to be the case



when the monthly periods are accompanied by severe pain. It is grievous to contemplate that oftentimes a lady, with every other temporal good, is deficient of two earthly blessings—health and children; and still more lamentable, when we know that this frequently arises from her own seeking, that they are withheld from her in consequence of her being a votary of fashion. Many of the ladies of the present day, too, if they do bear children, are, from delicacy of constitution, quite unable to suckle them. Should such things be? But why, it might be asked, speak so strongly and make so much fuss about it? Because the disease has become desperate, and delays are dangerous—because children among the higher ranks are becoming fewer and far between. Who so proper as a medical man to raise his voice to proclaim the facts, the causes, and the treatment? I respectfully inquire of my fair reader, is fashion a wife's mission? If it be not, what is her mission? I myself have an idea—a very ancient and an almost obsolete one—that the mission of a wife is a glorious mission, far removed from fashion, from frivolity, and from folly. A fashionable wife, after a fashionable season, is frequently hysterical and excitable, and therefore exhausted; she is more dead than alive, and is obliged to fly to the country and dose herself with quinine to recruit her wasted energies or to undergo a “rest cure.” Is such a wife as

this likely to become a joyful mother of children? I trow not. Her time is taken up between pleasure and excitement to make herself ill, and nursing to make herself well in order that she may, at the earliest possible moment, again return to her fashionable pursuits, which have with her become like drinking in excess, a necessity. Indeed, a fashionable life is a species of intoxication. Moreover, wine-drinking in excess and a fashionable life are often joined together.

While the poor, then, have usually an abundance of children, the rich have, as a rule, but few children. How very seldom we hear of a rich lady having three at a birth? It occasionally happens that a woman has even four or five at a birth. A case of this latter kind occurred in Wales:—"A woman living on the property of Sir Watkins W. Wynn presented her husband, a labourer, with five children at a birth. The Queen sent her £7. Twice she has had three at a birth, all of whom have lived. A Welsh correspondent tells us the poor woman has twenty-two children."—*Shrewsbury Paper*.

I consider *thorough ablution* of the body every morning one of the most important means of health to a young wife. A warm bath may be taken every morning for purposes of ablution, and not to lie in. The time in the bath should not be more than seven minutes, which is ample for

washing purposes. If prolonged beyond seven minutes a warm bath tends to become enervating. After the warm bath there is nothing more tonic and invigorating than a cool douche down the back.

The moment she has finished her bath she ought quickly to dry herself. I should recommend her to use as one of the towels the Turkish rubber; it will cause a delightful glow of the whole body.

The whole of the body, by the above method, except the hair of the head, is every morning thoroughly washed. The hair of the head ought occasionally, even with soap and water, to be cleansed, to keep it clean, and sweet, and wholesome; for nothing is more dirty, if it be not well attended to, than human hair, and nothing is more repulsive than a dirty head. Brushing of the hair, although beneficial both to the hair and health, will not alone thoroughly cleanse the hair and scalp. Some ladies attempt to clean their hair by simply washing it with rosemary, or with rose-water, or with other washes, but there is no more effectual way of doing it occasionally than with a flannel and soap and water. Bathing in the sea during the season, provided no grease has been previously used, is said to be good for the hair; it is thought that it both strengthens the roots, and beautifies the colour, I should advise my fair reader not to plaster her hair with grease or with pomade, or with other

unknown compounds: many of them are apt to make the head dirty, scurfy, and sore; indeed, many a nasty eruption is produced by such means.

It might be said that it is utterly impossible for a lady to keep her hair tidy unless she use some application to it. If such be the case, either a little scented castor oil, or cocoa-nut oil, may be applied by means of an old tooth-brush to smooth the hair.

If the hair should fall off, either a little cocoa-nut oil or a little scented castor oil, well rubbed every night and morning into the roots, is an excellent dressing. These are simple remedies, and can never do any harm, which is more than can be said of many quack nostrums, which latter often injure the hair irreparably.

If the hair should continue to fall off, the ends of the hair ought, every fortnight, to be cut by a hairdresser; this plan will be found most beneficial in strengthening the hair, and in keeping it from coming off. At the same time a medical man should also be consulted.

The best carpet, either for a bath-room or for a dressing-room, is kamptulicon, or linoleum, as the water spilt upon it after the use of a bath or ablution can, by means of a flannel, be readily absorbed; the window ought then to be thrown wide open, and the room will quickly be dried.

It would be well for a lady, when practicable, to

have, after she has finished dressing, a quarter of an hour's walk, either in the garden or in the grounds, in order to ensure a reaction, and thus to induce a healthy glow of the circulation, and to give her an appetite for her breakfast.

*With regard to diet.*—Although I have a great objection (which: I will particularise) to a young wife taking rich food and many stimulants, yet I am a great advocate for an abundance of good wholesome nourishment.

The meagre breakfasts of many young wives (eating scarcely anything) is one cause of so much sickness among them, and perhaps of so many puny children in the world. Let every young wife, and indeed everyone else, make a substantial breakfast. It is the foundation meal of the day; it is the first meal after a long, the longest fast. The meagre miserable breakfasts many young wives make is perfectly absurd; no wonder that they are weak, "nervous," and delicate. A breakfast ought as a rule to consist of eggs, or cold chicken, or cold game, or bacon, or ham, or fish, and *plenty of good bread*, and *not* of hot buttered toast, or hot rolls swimming in butter. Both of these latter articles are like giving the stomach sponge to digest, and making the partaker of such food for the rest of the day feel weak, spiritless, and miserable. If she select coffee for breakfast, let the *half* consist of good fresh milk; if she prefers



cocoa, let it be made of new milk instead of water; if she chooses tea, let it be new-made tea with plenty of cream in it. Milk and cream are splendid articles of diet. Let her then make a hearty breakfast, and let there be no mistake about it. Let every young wife, therefore, look well to the breakfast, that it be good and varied and substantial. There is an admirable work, *The Breakfast Book*, in which the author proves the importance of people making good and substantial breakfasts, and in which he indicates the kinds most suitable for the purpose. I have, in the text, availed myself of many of his valuable suggestions.

A meagre, unsubstantial breakfast causes a sinking sensation of the stomach and bowels, and, for the remainder of the day, a miserable depression of spirits. Robert Browning truly and quaintly remarks—

“ A sinking at the lower abdomen  
Begins the day with indifferent omen.”

“ No breakfast, no man,” is a just observation, and is equally applicable to the fair sex—“ no breakfast, no woman;” for one who is in the regular habit of eating but little or no breakfast is not a woman. She cannot half perform either a woman’s functions or a woman’s duties. This is one and the principal reason why a wife who is a wretched eater of breakfast is usually a wretched nurse to her child.



It frequently happens that a young wife has no appetite for her breakfast. She may depend upon it, in such a case, there is something wrong about her, and that the sooner it is remedied the better it will be for her health, for her happiness, and for her future prospects. Let her then, without loss of time, seek medical advice, that means may be used to bring back her appetite. The stomach in all probability is at fault; if it be, the want of appetite, the consequent sensation of sinking of the stomach, and the depression of the spirits, are all explained. With judicious treatment, all may soon be set to rights.

If the loss of appetite for breakfast arises from pregnancy,—and sometimes it is one of the earliest symptoms—time will remedy it, and the appetite, without the necessity of a particle of medicine, will shortly, with its former zest, return.

A young married woman's diet ought to be substantial, plain, and nourishing. She must frequently vary the kind of food, of meat especially, as also the manner of cooking it. Nature delights in a variety of food, of air, and of exercise. If she were fed for some considerable period on one kind of meat, she would scarcely digest any other; and, in time, either a disordered or a diseased stomach would be likely to ensue. I have sometimes heard with pain and annoyance a patient advised to live

on mutton chops; and to have no other meat than mutton! Now this is folly in the extreme.

Three substantial and nourishing meals a day will be sufficient. It is a mistaken notion to imagine that "little and often" is best. The stomach requires rest as much as, or more than, any other part of the body: and how, if food be constantly put into it, can it have rest? There is no part of the body more imposed and put upon than the human stomach—

"To spur beyond  
Its wiser will the jaded appetite,—  
Is this for pleasure? Learn a juster taste;  
And know that temperance is true luxury."—*Armstrong*:

It is a mistaken notion, and injurious to health, for a young wife, or for anyone else, to eat just before retiring to rest, a *hearty* meat meal—

"Oppress not nature sinking down to rest  
With feasts too late, too solid, or too full."—*Armstrong*.

She will, if a hearty meat meal be eaten, be restless, or she will feel oppressed and sleep very heavily, awakening in the morning tired and unrefreshed: her sleep will not be, as it ought to be—

"Like infants' slumbers, pure and light."—*Kemble*.

How often we hear a delicate lady declare that she can only eat one meal a day, and that a hearty meat meal the last thing at night; and who, moreover, affirms that she can neither sleep

at night, nor can she have the slightest appetite for any other meal but her evening meal, and that she should really starve if she could not have food when she could eat it! The fact is, the oppressed stomach oppresses the brain, and drives away sleep, and appetite, and health. The habit is utterly wrong, and oftentimes demands professional means to correct it.

Some persons sleep better at night without an evening meal at all—by going supperless to bed. A clear and an empty stomach at bedtime is with them the secret of sweet and refreshing slumber. They cannot at one and the same time, do two things—digest food and sleep! And as most people can dispense with food better than they can with sleep, by all means let sleep be the first considered.

How is it that sometimes a lady who has an excellent appetite is, notwithstanding, very thin? It is not what she eats, *but what she digests*, that makes her fat. Some people would fatten on bread and water, while others would, on the fat of the land, be as thin as Pharaoh's lean kine. Our happiness, and our longevity, much depend on the weakness or on the soundness of our stomachs: it is the stomach, as a rule, that both gauges our happiness and that determines the span of the life of both men and women. How necessary it is then, that due regard should be paid to such an important organ, and that everything should be done to con-

duce to the stomach's welfare—not by overloading the stomach with rich food; not by a scanty and meagre diet, but by adopting a middle course betwixt and between high living and low living—the *juste milieu*. We should all of us remember that glorious saying—those immortal words of St. Paul —“Be temperate in all things.”

Where a lady is very thin, good fresh milk (if it agree) should form an important item of her diet. Milk is both fattening and nourishing, more so than any other article of food known; but it should never be taken at the same meal (except it be in the form of pudding) with beer, or stout, or wine; they are incompatibles, and may cause derangement of the stomach and bowels. Milk would often agree with an adult, where it now disagrees, if the admixture of milk with beer, or stout, or wine were never allowed. If she cannot take milk, let her take cream and water. Cream, butter, and sugar are fatteners; but they must be given in moderation, or they will disorder the stomach, and thus the object will be defeated. Farinaceous foods, such as corn-flour and arrow-root, are all fatteners. Stout, if it agrees, is very fattening, much more so than wine. If claret be drunk at all, it should be sound and good, and of a first-class vintage. Cheap claret is like many other cheap articles—cheap and nasty!

Let me advise my fair reader to take plenty of

time over her meals, and to masticate her food well; as nothing is more conducive to digestion than thoroughly masticated food. No interruption should be allowed to interfere with the meals; the mind, at such times, should be kept calm, cheerful, and unruffled, for "unquiet meals make ill digestions." Many persons bolt their food! When they do, they are drawing bills on their constitutions which must inevitably be paid! The teeth act as a mill to grind and prepare the food for the stomach; if they do not do their proper work, the stomach has double labour to perform, and being unable to do it efficiently, it and the whole body in consequence suffer.

The teeth being so essential to health, the greatest care should be taken of them: they should be esteemed among one's most precious possessions.\*

With regard to *beverage*, there is, as a rule, nothing better for dinner than toast and water, or if it be preferred, plain water—

"Nought like the simple element dilutes;"

A lady sometimes, until she has had a glass of wine, cannot eat her dinner; when such is the case, by all means let a glass of wine be taken.

If a lady drink wine at all, let it be wine—if she can get it—there is so much rubbish in the

\* On the best means of preserving the teeth and gums, see my other work—*Advice to a Mother*.

market called wine that she cannot be too particular in the matter. The only likely way of obtaining it genuine is by applying to a respectable wine merchant, and by paying a fair price for it. Cheap wine is dear at any price, and is a conglomeration of nastiness.

The old German proverb says, "Wine is not made, it grows." This proverb nowadays is unfortunately not always true. A great deal of the wine that is now consumed is made, and does not grow, and has never seen the grape at all, but has been made in the chemist's laboratory; indeed there is scarcely any wine that is not more or less "doctored," either with brandy or with something worse!

If wine does not agree, and a stimulant is necessary, a tumblerful either of bitter ale or of good sound porter ought, instead of water, to be taken at dinner. But remember, if she drink either beer or porter, she must take a great deal of outdoor exercise, otherwise it will probably make her bilious. If she be inclined to be bilious, wine is superior to either beer or porter.

Wine, beer and porter do not always agree; some persons enjoy sounder health as thorough teetotalers. Wine, beer and porter will then irritate, excite and take away the appetite. Such people are better without stimulants altogether—wine, beer and porter weakening and not strengthening them. It would be folly in the extreme for such persons to be forced to swallow such stimulants—the more



they took the worse they would be. Alcohol in the wine, in the beer, and in the porter act upon them as a poison—there is no mistake about it. Alcohol in excess is a poison—a deadly poison, as I shall presently prove—and some peculiar constitutions cannot take it, however minute the quantity, or however dilute it be. This is not strange—such persons have a peculiar idiosyncrasy; in the same way as some people cannot take opium, however minute it may be—it makes them almost wild, as though they were insane; others cannot swallow small doses of ipecacuanha without producing violent vomiting and faintness; while, again, there are some persons who cannot take the smallest dose of drugs such as quinine or antipyrin without its inducing troublesome symptoms.

Brandy or whisky ought never to be taken by a young wife but as a medicine, and then but rarely, and only in cases of extreme exhaustion. It would be a melancholy and gloomy prospect for her daily to drink brandy; she would, in all probability, in a short time become a confirmed drunkard. There is nothing, *when once regularly taken* more fascinating and more desperately dangerous and degrading than spirit-drinking. It has caused the destruction of tens of thousands both of men and of women! If a lady once takes to regular daily brandy-drinking her health will as surely melt away as “wax melteth at the fire.”

A barren lady, in consequence of her being barren, is frequently dreadfully depressed in spirits—nothing is more depressing to some wives than the want of children. Now, in her fits of depression, such a one is apt to fly to sips of brandy or whisky in order to relieve her depression. Oh! fatal mistake! She is only confirming her barrenness, she is only clenching the nail; as she is likely under such treatment to be barren for the rest of her life; for spirit-drinking appears to be an enemy to conception.

A wife ought not, if she feels low, to fly on every occasion to wine to raise her spirits, but should try the effects of a walk in the country, and

“Draw physic from the fields in draughts of vital air.”

Armstrong.

An excitable wife is a weakly wife; “excitement is the effect of weakness, not of strength.” Wine in large quantities will not strengthen; but on the contrary, will decidedly weaken; the more the wine, the greater the debility and the greater the excitement—one follows the other as the night the day. A person who drinks much wine is always in a state of excitement, and is invariably hysterical, weak, low, and nervous, and frequently barren.

Alcoholic stimulants in excess are “a delusion and a snare,” and are one of the most frequent causes of excitement, and therefore both of weak-

ness and of barrenness. Alcohol, pure and undiluted, and in excess, is a poison, and is ranked among the deadly poisons; if a person were to drink at one draught half a pint of undiluted alcohol it would be the last draught he or she would ever, in this world, drink—it would be as surely fatal as a large dose of either arsenic or strychnine! Brandy, whisky, gin, and wine are composed of alcohol as the principal ingredient; indeed, each and all of them entirely owe their strength to the quantity of alcohol contained therein. Brandy, whisky, gin, and wine, without the alcohol, would, each one of them, be as chip in porridge—perfectly inert. Brandy and wine, the former especially, contain large proportions of alcohol, and both the one and the other, in excess, may either prevent a woman from conceiving and thus make her barren, or if she do conceive it may poison the unborn babe within her, and it then either makes him puny and delicate, or it downright kills him in the womb, and thus causes a miscarriage.

Brandy was formerly sold only by the chemist. Brandy is a medicine—a powerful medicine—and ought *only* to be prescribed as a medicine; that is to say, but seldom, in small and in measured quantities at a time, and only when absolutely necessary: now it is resorted to on every occasion as a panacea for every ill! If taken regularly

and in quantities, as unfortunately it frequently now is, it becomes a desperate poison—a pathway leading to the grave! It is utterly impossible for any person to hold in the mouth, for five minutes at a time, a mouthful of neat brandy, without experiencing intense suffering. If it have this fearful effect on the mouth, what effect must this burning fluid, when taken in quantities, have on the stomach? Injury, most decided injury to the stomach, and, through the stomach, disease and weakness to the remainder of the body! Brandy is a wonderful and powerful agent: brandy has the effect, if taken in excess and for a length of time, of making the liver as hard as a board; brandy in large quantities, and in the course of time, has the power of making the body marvellously big—as big again; but not with firm muscle and strong sinew, not with good blood and wholesome juices—nothing of the kind; but of filling it full, even to bursting, with water! Brandy has the power of taking away a giant's strength, and of making him as helpless as a little child! Habitual brandy drinking, poisons the very streams of life! It would take more time and space than I have to spare to tell of the wonderful powers of brandy; but, unfortunately, as a rule, its powers are more those of an angel of darkness than those of an angel of light!

If the above statements be true (and they cannot

be contravened), they show the folly, the utter imbecility, and the danger, both to mother and to babe, of 'dosing' a wife—be she strong or be she delicate, and more especially if she be delicate—with large quantities either of wine or brandy. Brandy, gin, and 'whisky, act on the human economy very much alike; for, after all, it is the quantity of alcohol contained in each of them that gives them their real strength and danger. I have selected brandy as the type of all of them, as brandy is a fashionable remedy for all complaints. The habit of drinking imperceptibly but rapidly increases, until at length, in many cases, that which was formerly a teaspoonful becomes a table-spoonful, and eventually a wine-glassful, with what result I have earnestly endeavoured faithfully to portray. Avoid, then, the first step in regular brandy-drinking; it is the first step in this, as in many other things, that oftentimes leads to danger and eventually to destruction! Dr. Parkes, in his valuable work on *Hygiene* asserts that "if alcohol were unknown, half the sin and a large part of the poverty and unhappiness in the world would disappear." Shakespeare was aware of the diabolical powers of alcohol when he said, "O thou invisible spirit of wine, if thou hast no name to be known by, let us call thee devil!" The Bible, too, gives emphatic testimony of the evil effects of "wine" and of "strong drink":—"Wine is a mocker,

strong drink is raging, and whosoever is deceived thereby is not wise."—*Proverbs*.

I am quite convinced that one cause of barrenness is *excessive* wine-drinking. This is an age of stimulants, and the practice is daily increasing. A delicate lady is recommended to take three or four glasses of wine daily. It seems for the moment to do her good, and whenever she feels low she flies to it again. The consequence is, that she almost lives upon wine, and takes but little else besides! Who are the fruitful women? Poor women who cannot afford to drink stimulants; for instance, 'poor Irish women and poor curates' wives, who have principally water, and milk, and butter-milk to drink.

Wine was formerly a luxury, it is now made by many a necessary of life. Fruitful women, in olden times, were more common than they are now. Riches, and consequently wine, did not then so much abound, but children did much more abound. The richer the person, the fewer the children.

Do not let me be misunderstood: wine and brandy, in certain cases of extreme exhaustion, are, even for very young children, most valuable remedies: but I will maintain that both wine and brandy require the greatest judgment and skill in administering, and do irreparable mischief unless they are most carefully and judiciously prescribed. Wine ought to be very rarely given to the young;



indeed, it should be administered to them with as much care and as seldom as any other dangerous or potent medicine.

It is surprising nowadays the quantity of wine some few young single ladies at parties can imbibe without being intoxicated; but whether, if such ladies marry, they will make fruitful wives, is quite another matter; but of this I am quite sure, that such girls will, as a rule, make delicate, hysterical and unhealthy wives. The young are peculiarly sensitive to the evil effects of over-stimulation. Excessive wine-drinking with them is a canker eating into their very lives. It is time that these facts were proclaimed through the length and breadth of our land before mischief be done past remedy.

The champagne-cup is a fashionable and favourite beverage at parties, especially at dances. It is a marvel to note how girls will, in quantities, imbibe it. How cheerful they are after it; how bright their complexions; how sparkling their eyes; how voluble their tongues; how brilliant their ideas! But, alas! the effects are very evanescent—dark clouds soon o’ershadow the horizon, and all is changed! How pale, after it, they become; how sallow their complexions; how dim their eyes; how silent their tongues; how depressed their spirits—depression following in an inverse ratio to over-stimulation; and if depression, as a matter of course, weakness

and disease! Young men who witness their proceedings may admire them vastly as partners for the evening, but neither covet nor secure them as partners for life. Can they be blamed? Certainly not! They well know that girls who, at a dance, imbibe *freely* of the champagne-cup, and who, at a dinner-party, drink, as some few are in the habit of drinking, four, or five, or even six glasses of wine—that such wives as these, if ever they do become mothers (which is very doubtful) will be mothers of a degenerate race. It is folly blinking the question; it is absolutely necessary that it be looked boldly in the face, and that the evil be remedied before it be too late. The champagne-cup is one of the most fascinating but most desperately dangerous and deceptive drinks a young girl can imbibe, and should be shunned as the plague.

There is an immense deal of drinking in England, which, I am quite convinced, is one reason of so few children in families, and of so many women being altogether barren. It is high time that these subjects were looked into, and that the torrent be stemmed, ere it o'erflows its banks, and carry with it a still greater amount of barrenness, of misery, and of destruction.

It might be said that the light wines contain but little alcohol, and therefore can cause, even if taken to excess, but slight injurious effects on

the constitution. I reply that even light wines, taken in quantities, may conduce to barrenness, and that, as a rule, if a lady once, unfortunately, takes to drinking too much wine, she is not satisfied with the light wines, but at length flies to stronger wines — to wines usually fortified with brandy, such as either sherry or port wine, or even, at last, to brandy itself! I know that I am treading on tender ground, but my duty as a medical man, and as a faithful chronicler of these matters, obliges me to speak out plainly, without fear or without favour, and to point out the deplorable consequences of such practices. I am quite aware that many ladies have great temptations and great inducements to resort to wine to cheer them in their hours of depression and loneliness; but unless the danger be clearly pointed out and defined, it is utterly impossible to suggest a remedy, and to snatch such patients from certain destruction.

I am quite convinced of one thing, namely, that the drinking of *much* wine—be it light as claret, or be it heavy as port—sadly injures the complexion, and makes it muddy, speckled, broken-out, and pasty.

This is an age of stimulants—it is the curse of the day! Let me paint a case, not an imaginary one, but from the life:—A lady in the higher ranks is very weak and “nervous”; she has no appetite; she cannot sleep at night; she can take

no exercise; she is depressed and low—feeling as though she should sink into the earth; her pulse is feeble; she has palpitations of the heart; she feels faint after the least exertion; she has neuralgia—pains flying about from place to place. She is ordered wine! she drinks it—glass after glass—with momentary relief; but it is a flash in the pan, it is an enemy in the guise of a friend; as soon as the effects are over, she is weaker than before; at length the wine alone is not strong enough for her; she feels more depressed than ever; she now drinks brandy as well! She goes on drinking wine and brandy, more and more, until, at length, she lives on them—it is her meat and drink, her sleep and exercise, her pill and potion, and everything else besides! Stimulants in excess, instead of giving strength, cause excessive debility. Such a patient is never out of the doctor's hands, until she falls into those of the undertaker! It is folly to expect that a wife, almost living on stimulants, can even for a single day feel well—leaving alone the chance of her ever being the mother of a family! It is a blessing if she never becomes a mother—she could not perform the offices and duties of the parent! I am aware that the picture I have just painted is grim, hideous, and ghastly, but it is, notwithstanding, a faithful likeness, as doctors in extensive practice can abundantly testify. Oh, that my words

could, before it be too late, reach the hearts and consciences and understandings of such patients, and thus be the means of snatching them from inevitable destruction, and from a disgraceful end! It might be asked, What in the first instance caused her illness? The stomach was at fault: it was, from improper management, weak and disordered, and quite incapable of doing its needful work: hence the whole machine was thrown out of gear, and this was, beyond measure, aggravated by the subsequent swallowing of so much wine and brandy. It might, moreover, be asked, What, in such a case, is a poor creature to do? Let her consult an experienced doctor, and have her stomach put in order, and then let her keep it in order, not by brandy or by much wine, but by simplicity of living—by the rules of health as laid down in these pages.

There is in Crabbe's *Poems* a graphic and truthful description of the effects of wine on the human economy, which I cannot help quoting—

“Wine is like anger; for it makes us strong,  
Blind and impatient, and it leads us wrong;  
The strength is quickly lost; we feel the error long.”

My deliberate opinion is, and what I have for many years held and publicly proclaimed, that no woman—be she strong, or be she delicate, and more especially if she be delicate—should ever exceed two glasses of wine daily—claret, as a rule, being the

best for the purpose. Beyond that amount, wine becomes a slow and insidious poison. Wine beyond two glasses gives false strength—excitement; or in other words, debility and prostration—chronic ill-health and hysteria!

Remember, then, I am not objecting to a lady taking wine in moderation—certainly not; a glass of claret with her food may do her great good; but I do strongly object to her drinking, as many ladies do, five or six glasses of wine. I will maintain that such a quantity is most detrimental both to her health and to her fecundity. The effect of the *use* of wine is beneficial; but the effect of the *abuse* of it is deplorable in the extreme. Wine is an edged tool, and will, if not carefully handled, assuredly wound most unmercifully. I have not the slightest doubt that the quantity of wine consumed by many ladies is one cause, in this our day, of so much delicacy of constitution. It is a crying evil, and demands speedy redress; and as no more worthy medical champion has appeared in the field to fight the battle of *moderate* wine-drinking, I myself have boldly come forward to commence the affray, fervently trusting that some earnest men will join me in the conflict. I consider that the advocates of a plentiful supply of alcoholic stimulants are wrong, and that the upholders of total abstinence principles are equally wrong, and that the only path of health and of



safety lies between them both—in moderation. A teetotaler and an advocate of a plentiful supply of alcoholic drinks are both very difficult to please; indeed, the one and the other are most intemperate. The violence and obstinacy of the contending parties, each of whom is partly right and partly wrong, have long ago prevented a settlement of the question at issue, and have consequently been the means of causing much heart-burning, misery, and suffering. The *Times* once pithily remarked that it would be well if the two combatants were “to mix their liquors.”

You may as well say that you are not to eat because you may gluttonise as that you are not to drink wine because you may get drunk—the one absurdity is as great as the other. Extremes either in eating or in drinking are alike detrimental to happiness, to health, and to longevity. Blessed is that man, or that woman, who is “temperate in all things.”

The use of wine and the abuse of wine is graphically, truthfully, and beautifully told in *Ecclesiasticus*, the advice contained therein being well worthy of deep consideration and of earnest attention:—“Wine is as good as life to a man if it be drunk moderately: what is life then to a man that is without wine? for it was made to make men glad. Wine measurably drunk, and in season, bringeth gladness of the heart and cheer-

fulness of the mind. But wine drunken with excess maketh bitterness of the mind, with brawling and quarrelling. Drunkenness increaseth the rage of a fool till he offend: it diminisheth strength and maketh wounds."

A wife has a noble mission to perform—to stem the progress and to help to destroy the giant monster intemperance, who is now stalking through the length and breadth of our land, wounding and slaying in every direction, filling our hospitals, workhouses, lunatic asylums, gaols, and graves with innumerable victims.

There are three classes of persons who should be engaged in such a noble mission—namely, the clergyman, the doctor, and the wife; but the last named of all the three classes has more power and persuasion than the other two combined: hence one reason of my earnest appeal to her, and of my strenuous endeavour to enlist her in the holy cause of temperance.

A young wife ought to rise betimes in the morning. Let her imitate the example of *the* Duke of Wellington, who whenever he turned in bed made a point of turning out of it; indeed, so determined was that illustrious man not to allow himself to doze after he was once awake, that he had his bed made so small that he could not conveniently turn in it without first of all turning out of it. Let her, as soon as she be married,

commence early rising; let her establish the habit, and it will for life cling to her—

“Awake ! the morning shines, and the fresh field  
Calls us ; we lose the prime, to mark how spring  
Our tender plants ; how blows the citron grove,  
What drops the myrrh, and what the balmy reed :  
How Nature paints her colour ; how the bee  
Sits on the bloom.”—*Milton*.

It is wonderful how much may be done betimes in the morning. There is nothing like a good start. It makes for the remainder of the day the occupation easy and pleasant—

“Happy, thrice happy, every one  
Who sees his labour well begun,  
And not perplexed and multiplied  
By idly waiting for time and tide.”—*Longfellow*.

An early riser ought always to have something to eat and drink, such as a little bread and butter, and either a cup of tea or a draught of new milk, before she goes out of a morning; this need not interfere at the usual hour with her regular breakfast. If she were to take a long walk on an empty stomach, she would for the remainder of the day feel tired and exhausted, and she would then, but most unfairly, fancy that early rising did not agree with her.

The early morning is one of the best and most enjoyable portions of the day. There is a perfect charm in nature which early risers alone can appreciate. It is only the early riser that ever sees

the "rosy morn," the blushing of the sky, which is gloriously beautiful!

Early rising imparts health to the frame, strength to the muscles, and comeliness to the countenance; it clears the brain, and thus brightens the intellect; it is a panacea for many of the ills of life, and, unlike many panaceas; it is both simple and pleasant in its operation; it calms the troubled breast; it gives a zest to the other employments and pleasures of the day; and makes both man and woman look up from "nature's works to nature's God!"

Early rising rejuvenises the constitution; it makes the middle-aged look young, and the old look middle-aged, it is the finest cosmetic in the world, and tints the cheeks with a bloom the painter emulates but in vain!

If a mistress rises early, the servants are likely to follow suit; a lazy mistress is almost sure to have lazy servants; the house becomes a sluggard's dwelling! Do not let me be misunderstood; I do not recommend any unreasonable hours for rising in the morning; I do not advise a wife to rise early for the sake of rising early; there would be neither sense nor merit in it; I wish her to have her full complement of sleep—seven or eight hours; but I do advise her *to go to bed early*, in order that she may rise early. I maintain that it is the *duty* of every wife, unless prevented by illness, to be

an early riser. This last reason should have greater weight with her than any other that can possibly be brought forward! All things in this world ought to be done from a sense of duty; duty ought to be a wife's and every other person's pole-star!

Let a young wife, if she be anxious to have a family and healthy progeny, be in bed betimes. It is impossible that she can rise early in the morning unless she retires early at night. "One hour's sleep before midnight is worth three after." Sleep before midnight is most essential to health, and if to health, to beauty; hence, sleep before midnight is called *beauty-sleep*! The finest cosmetic is health!

She ought to pay particular attention to the *ventilation* of her sleeping apartment, and she herself, before leaving her chamber in the morning, ought never to omit to open the windows; and in the summer she should during the night leave the window-sash open. Most people can soon accustom themselves to sleep with a window open or partly open, except, perhaps, in the very coldest weather. If the room be small, it may be desirable to have, instead of the window, the door (secured from intrusion by a door chain) unclosed; and to have, as well, either the skylight or the landing window open. There ought, by some means or other, if the inmates of the room are to have sweet and refreshing sleep, to be thorough ventilation of the

sleeping apartment. "If there be a dressing-room next to the bedroom, it will be well to have the dressing-room window, instead of the bedroom window, open at night. The dressing-room door will regulate the quantity of air to be admitted into the bedroom, opening it either little or much as the weather might be cold or otherwise." The idea that it will give cold is erroneous; it will be more likely, by strengthening the system and by carrying off the impurities of the lungs and skin, to prevent cold.

It is madness to sleep in a room without ventilation—it is *inhaling poison*; for the carbonic acid gas, the refuse of respiration, which the lungs are constantly throwing off, is a poison—a deadly poison—and, of course, if there be no ventilation, a person must breathe this carbonic acid gas mixed with the atmospheric air. Hence the importance, the vital importance, of an *open* window. The window, either of the bedroom or of the dressing-room, should not be closed, even in the night, unless the weather be either very wet or bitterly cold. I should strongly recommend my fair reader, and, indeed, everyone else, to peruse the good and talented Florence Nightingale's *Notes on Nursing*. They ought to be written in letters of gold and should be indelibly impressed on the memory of everyone who has the interest of human life and happiness at heart. Florence Nightingale declares



*that no one, while in bed, ever catches cold from proper ventilation.*

I fearlessly assert that no one can sleep sweetly and refreshingly unless there be *thorough* ventilation of the chamber. She may have, in an *unventilated* apartment, heavy, drowsy, death-like-sleep, and well she may! She is under the stupefying effects of poison; the carbonic acid gas, which is constantly being evolved from the lungs, and which wants a vent but cannot obtain it, is, as I have before remarked, *a deadly poison!* She may as well take every night a stupefying opiate as breathe nightly in a bedroom charged with carbonic acid gas; the one would in the long run be as pernicious as the other. To show the power of carbonic acid gas in sending people to sleep, we have only to notice a crowded, ill-ventilated church of an evening, when, even if the preacher be an eloquent man, the majority of the congregation is fast asleep—is, in point of fact, under the soporific influence of the carbonic acid gas, the church being at the time full of it. Carbonic acid gas is as certain, if not more certain, to produce a heavy death-like slumber as either numbing opium or drowsy poppy!

That exposure of fresh cold air, even when the body is kept warm by suitable clothing, necessarily produces colds and other disagreeable ailments is a fallacy that is not dead even yet. The most modern advance in the treatment of consumption is the employment of what is sometimes called

the "open air" treatment. The most delicate consumptives live winter and summer, night and day, practically in the open air. The windows are seldom or never closed—indeed, in some establishments there are no windows at all but only openings in the walls of the rooms that can never be closed, no matter how cold the weather may be. And yet under this rigorous exposure to the air many consumptives are absolutely cured and practically none is ever made worse. Of course, great care is taken to keep the body warm by means of suitable clothing. If this exposure to the air does nothing but good to a delicate consumptive it is difficult to see how it can do harm to a healthy person.

Fortunately the educated classes in this country recognise the importance of fresh air in the preservation of health to an extent that was not the case a generation ago, but the poorer classes are still very ignorant on this subject.

I moreover declare that a lady cannot have sweet refreshing sleep at night unless during the day she takes plenty of exercise, and unless she have an abundance of active, useful occupation. Occupation—active, useful occupation—is the best composing medicine in the world, and the misfortune of it is that the wealthy have little or no occupation to cause them to sleep. Pleasure they have in abundance, but little or no real occupation. "The sleep of a labouring man is sweet, whether he eat

little or much; but the abundance of the rich will not suffer him to sleep.”—*Ecclesiastes*.

Sleep is of more consequence to the human economy even than food. Nothing should therefore be allowed by a young wife to interfere with sleep. And if the attendance on large assemblies, balls and concerts, in any way, interferes with sleep, they ought one and all to be sedulously avoided.

As exercise is very conducive and provocative of sleep—sound, sweet, child-like sleep—exercise must be practised, and that not by fits and starts, but regularly and systematically. She ought, then, during the day, with exercise and with occupation, to tire herself, and she will have sweet and refreshing sleep.

Sleep is one of the best gifts of Providence. Sleep is a comforter, a solace, a boon, a nourisher, a friend. Happy, thrice happy, is a wife who can sleep like unto a little child! When she is well, what a comfort is sleep; when she is ill, what a soother of pain is sleep; when she is in trouble, what a precious balm is sleep!

A luxurious, idle wife cannot sleep; she, night after night, tumbles and tosses on her bed of down. What has she done during the day to tire herself, and thus to induce sleep? Alas! nothing. She in consequence never experiences—

“Tired Nature’s sweet restorer, balmy sleep.”—*Young*.

For, after all, outdoor exercise and useful occupation are the best composing medicines in the world! Many an idle lady who cannot sleep, instead of taking exercise, takes opiates—

“To steep the senses in forgetfulness.”

The constant taking of exercise is most beneficial, strengthening alike both the bodily and mental faculties; while the constant taking of opiates is most injurious, weakening alike both the body and mind. Unfortunately, in this our day there is too much of the one and too little of the other taken; but in this, as in everything else, a reckoning day is sure to come when old scores must, to the uttermost, be paid. Do not let me be misunderstood, opiates in many diseases are invaluable, but like all valuable but powerful medicines, require the judgment and discrimination of a doctor in their administration.

The frequent swallowing of an opiate is a species of dram-drinking, another form—a worse form—of intoxicating liquors; it is like brandy—if lavishly and not judiciously given—it can only have but one termination—the grave! Oh! if a wife would think a little more of God’s grand remedies—exercise and fresh air—and a little less of man’s puny inventions—opiates—how much better it would be for her and for all connected with her.

Opiates, in certain diseases, when prescribed by a medical man, are most valuable; but for patients

themselves to prescribe them for themselves is quite as perilous as patients inhaling chloroform by themselves; indeed, opiates, like chloroform, require skilful handling, careful watching, and strict supervision.

Nature's simple remedies are oftentimes far superior and far more agreeable than any to be found in the Pharmacopœia. It would have been a blessing to many a rich, indolent, and luxurious lady if she had been born in a lower rank—in one in which she would have been compelled to work for her daily bread; if she had been, she would, in many instances, have been far happier and healthier—

“ Verily

I swear, 'tis better to be lowly born,  
And range with humble livers in content,  
Than to be perked up in a glistering grief  
And wear a golden sorrow.”—*Shakespeare.*

Indolence and luxury kill more than hard work and hard fare ever did, or ever will kill. Indolence and luxury are slow poisons; they destroy by degrees, and are in the end as certain in their deleterious effects as either arsenic or deadly nightshade.

I must not forget to speak of the paramount importance in a dwelling of an abundance of *light*—of *daylight*. Light is life, light is health, light is a physician, light is a beautifier, light is a com-

forter. Light is life: the sun gives life as well as light; if it were not for the sun, all creation would wither and die. There is "no vitality or healthful structure without light."—*Dr. Forbes Winslow*. Light is health: it oxygenises the blood, and renovates and invigorates the frame. Light is a physician: it drives away many diseases, as the mists vanish at the approach of the sun; and it cures numerous ailments which drugs alone are unable to relieve. Light is a beautifier: it tints the cheeks with a roseate hue, and is far superior to "cosmetic, wash, or ball." Light is a comforter: it brightens the countenance, cheers the heart, and drives away melancholy—

"Prime cheerer, light!  
Of all material beings first and best."—*Thomson*.

It is a glorious fact to know, that—

"There's always sunshine somewhere in the world."

For the sun "goeth forth from the uttermost part of the heaven, and runneth about unto the end of it again: and there is nothing hid from the heat thereof."

Look at the bloom on the face of a milkmaid! What is it that tints her cheek? An abundance of light. Behold the pallid, corpse-like countenance of a factory-girl! What blanches her cheek? The want of light, of air, and of sunshine.



A room, then, ought to have *large* windows, in order that the sun may penetrate into every nook and corner of the apartment. A gardener thoroughly appreciates the importance of light to his flowers; he knows, also, that if he wishes to blanch some kinds of vegetables—such as celery and sea-kale—he must keep the light from them: and if my fair reader desires to blanch her own cheeks, she ought to keep the light from them; but, on the other hand, if she be anxious to be healthy and rosy, she must have plenty of light in her dwelling.

The want of light stunts the growth, dims the sight, and damps the spirits. Miners, who live a great part of their lives in the bowels of the earth, are generally stunted; prisoners, confined for years in a dark dungeon, may become blind; people who live in dark houses are usually melancholic.

Light banishes from rooms foulness, fustiness, mustiness, and smell. Light ought, therefore, to be freely allowed to enter every house, and be esteemed as the most welcome of visitors. Let me then advise every young wife to admit into her dwelling an abundance of light, of air, and of sunshine.

There is nothing like letting daylight into dirty places: the sun is the best scavenger, purifier, and disinfector; but the sun itself cannot be contaminated by filth, for “the sun, though it passes through dirty places, yet remains as pure as before.”

It is a grievous sin to keep out from a dwelling the glorious sunshine. We have heard of "a trap to catch a sunbeam"; let the open window be a trap, and a more desirable prize cannot be caught than a sunbeam. Sunbeams, both physical and metaphorical, make a house a paradise upon earth! They are the heritage of the poor as well as of the rich. Sunshine is one of our greatest, purest and cheapest enjoyments—

"Oh, 'tis the sun that maketh all things shine."

*Shakespeare.*

There is in *Ecclesiastes* a beautiful passage on the effects of light: "Truly the light is sweet, and a pleasant thing it is for the eyes to behold the sun." We now know that many diseases are due to the fact that very minute particles of a low form of vegetable life, called *microbes* or *germs*, gain entrance to the body and grow in the blood and tissues. It has been shown that both fresh air and sunlight are great enemies to these poisonous germs and will in time kill them. This is another and very important reason why our rooms should have abundant fresh air and sunlight.

Let me strongly caution the newly-made wife against the evil effects of *tight-lacing*. Let her dress be loose, and be suitable to the season. She ought not to adopt the fashion of wearing in the morning warm clothes with long sleeves and in the evening thin dresses with short sleeves.

If a young wife be delicate, and if her circulation be languid, a woollen vest should be worn next the skin in the day-time, both winter and summer. It is important that it should be borne in mind that the wearing of wool next the skin is more necessary in the summer than in the winter-time. A lady, in the summer, is apt, when hot either from the weather or from exertion, to get into a draught to cool herself, and, not wearing wool next the skin, she is almost sure at such times to catch a chill. Now, wool being a bad conductor of heat keeps the body at a tolerably equal temperature, and thus materially lessens the risk. When it is considered that many of the diseases afflicting humanity arise from chills, the value of wearing wool next the skin as a preventive is at once apparent.

It might be said, What has all this to do with the health of a wife? I reply, much. The customs, habits and luxuries of the present day are very antagonistic to health; they can only make work for the doctor and gladden the hearts of those who preach the doctrine of the eligibility of small families!

Pleasure to a certain degree is as necessary to the health of a young wife, and to everyone else, as the sun is to the earth—to warm, to cheer and to invigorate it, and to bring out its verdure. Pleasure in moderation rejuvenises, humanises and improves the character, and expands and exercises the good quali-

ties of the mind; but, like the sun, in its intensity, it oppresses, dries up, and withers. Pleasures kept within due bounds are good; but in excess are utterly subversive of health and happiness.

Let the *pleasures* of a newly-married wife, then, be dictated by reason, and not by fashion. She ought to avoid all recreations of an exciting kind, as depression always follows excitement. I would have her prefer the amusements of the country to those of the town—such as a flower garden, botany, archery, lawn-tennis, bowls, bicycling, riding, motoring—everything, in fact, that will take her into the open air and will cause her to appreciate the pure, simple, and exquisite beauties of Nature. Lawn-tennis I consider to be one of the best games ever invented; it induces a lady to take exercise which perhaps she would not otherwise do; it takes her into the open air, it strengthens her muscles, it expands her chest, it promotes digestion, it circulates her blood, and it gives her an interest which is most beneficial both to mind and body. I am quite sure that one reason why tennis so much benefits the health is, because it is attended with so much pleasure, for—

“No profit grows, where is no pleasure ta'en.”

Oh! that my countrywomen should prefer the contaminated and foul air of ball-rooms to the fresh, sweet, and health-giving air of the country!

Let me in this place enter my strong protest against a young wife *dancing* if she be *enceinte*. If she be anxious to have a family it is a most dangerous amusement, as it is a fruitful source of miscarriage.

Although dancing during pregnancy is injurious, singing, at such times, is not, and may be indulged in during the whole period of pregnancy; indeed, it is, during the time she is *enceinte* peculiarly valuable; it is exercise without too much fatigue, it is pleasure blended with benefit and cannot be too strongly recommended.

The quiet retirement of her own home ought then to be her greatest pleasure and her most precious privilege. Home is, or ought to be, the kingdom of woman, and she should be the reigning potentate. England is the only place in the world that truly knows what *home* really means. The French have actually no word in their language to express its meaning. The author of *The Pleasures of Hope* sweetly and truly sings—

“That home, the sound we English love so well  
Has been as strange to me as to those nations  
That have no word, they tell me, to express it.”

A well-regulated, calm, and contented mind is the best physician in the world, which not only oftentimes prevents disease, but if it does occur, tends very much to lessen its poignancy, and eventually to cure it. The hurly-burly of a fash-

ionable life is very antagonistic, then, to health and to all home comforts. How true is that beautiful saying in *Isaiah*—"In quietness and in confidence shall be your strength."

Cheerfulness, contentment, occupation, and healthy activity of mind cannot be too strongly recommended. A cheerful, happy temper is one of the most valuable attributes a wife can have. The possession of such a virtue not only makes herself, but everyone around her happy. It gilds with sunshine the humblest dwelling, and often converts an indifferent husband into a good one. Happy is the man who has a contented wife! A peevish, discontented helpmate (helpmate, save the mark!) is always ailing, is never satisfied, and does not know, and does not deserve to know, what real happiness is. She is "a thorn in the flesh." A bad wife is the greatest misfortune. Dante, who was unhappy in his conjugal relations, says in his *Inferno*—

"Ma la fiera moglie  
Mi nuoce piu ch'altro."

Notwithstanding she might have all that she can desire in this world, yet being discontented, she herself is of all women the most miserable—

"Nought's had, all's spent,  
Where our desire is got without content."

Shakespeare, in another place, pertinently asks—

"What's more miserable than discontent?"

Everything ought to be done to cultivate cheer-



fulness; it might be cultivated just as readily as exercise or music is cultivated: it is a miserable thing to go gloomily through the world when everything in Nature is bright and cheerful. "Laugh and grow fat" is a saying as old as the hills, and it is as true as it is old. The moping, miserable people there are in the world are enough to inoculate the rest of mankind with melancholy. Cheerfulness is very contagious, and few can resist its blandishments. A hearty laugh is good for the digestion, and makes the blood course merrily through the veins. It has been said that it is not genteel to laugh aloud; but, like many fashionable sayings, it is the very essence of folly. Cheerfulness is like a valuable prescription, for "a cheerful countenance doeth good like a medicine."

One of the greatest requisites, then, for a happy home is a cheerful, contented, bright, and merry wife. Her face is perpetual sunshine; her presence is that of an angel; she is happy in herself, and she imparts happiness to all around her. A gentle, loving, confiding, placid, hopeful and trusting disposition has a great charm for a husband, and ought, by a young wife, to be assiduously cultivated—

"For gentleness, and love, and trust,  
Prevail o'er angry wave and gust."—*Longfellow*.

Pope has a similar passage to the above—

"And trust me, dears ! good humour will prevail,  
*When airs, and flights, and screams, and scolding fail.*"

Sweet temper gives beauty to the countenance; while a wife who, without rhyme or reason, is always grieving and grumbling, becomes old before her time; she herself plants wrinkles on her brow and furrows on her cheek, and makes her complexion muddy and pasty looking—

"For the canker grief,  
Soils the complexion, and is beauty's thief."—*Crabbe*.

Every young wife, let her station be ever so exalted, ought to attend to her *household duties*. Her health, and consequently her happiness, demands the exertion. The want of occupation—healthy, useful occupation—is a fruitful source of discontent, of sin, and of disease. If a young married lady did but know the importance of occupation—how much misery might be averted, and how much happiness might, by attending to her household duties, be ensured—she would appreciate the importance of the advice. Occupation improves the health, drives away *ennui*, cheers the hearth and home; and, what is most important, if household duties be well looked after, her house becomes a paradise, and she the ministering angel to her husband. "I find," says Dr. Chalmers, "that successful exertion is a powerful means of exhilaration, which discharges itself in good humour upon others."

But she might say—"I cannot always be occupied; it bores me; it is like a common person; I am a lady; I was not made to work; I have neither the strength nor the inclination for it; I feel weak and tired, nervous and spiritless, and must have rest." I reply, in the expressive words of the poet, that—

"Absence of occupation is not rest.  
A mind quite vacant, is a mind distressed."—*Cowper*.

Hear, too, what another poet sweetly sings of rest—

"Rest ? Thou must not seek for rest  
Until thy task be done ;  
Thou must not lay thy burden down  
Till setting of the sun."—*T.M.W.*

"If time be heavy on your hands," are there no household duties to look after, no servants to instruct, no flower-beds to arrange, no school-children to teach, no sick-room to visit, no aged people to comfort, no widow or orphan to relieve?

"Nor any poor about your lands ?  
Oh ! teach the orphan boy to read,  
Or teach the orphan girl to sew—  
Pray heaven for a human heart."—*Tennyson*.

To have nothing to do is most wretched, wearisome, destructive to the mind. The words of Martin Luther on this subject should be written in letters of gold, and ought to be kept in constant remembrance by every man and woman,

be they rich or poor, lettered or unlettered, gentle or simple. "The mind," said he, "is like a mill that cannot stop working; give it something to grind, and it will grind *that*. If it has nothing to grind, it grinds on yet; but it is itself it grinds and wears away."

A lady in this enlightened age of ours considers it to be horribly low and vulgar to strengthen her loins with exercise and her arms with occupation, although such a plan of proceeding is, by the wisest of men, recommended in the Bible—"She girdeth her loins with strength, and strengtheneth her arms."—*Proverbs*.

A husband soon tires of brilliant performances on the piano or pianola, and of the crochet and fancywork done by his wife; but he can always appreciate a comfortable, clean, well-ordered, bright, cheerful, happy home, and a good dinner. It might be said that a wife is not the proper person to cook her husband's dinner. True! but a wife should see and know that the cook does her duty; and if she did perchance understand *how* the dinner ought to be cooked, I have yet to learn that the husband would for such knowledge think any the worse of her.

A boy is brought up to his profession, and is expected to know it thoroughly: how is it that a girl is not brought up to her profession of a wife; and why is it that she is not taught to thoroughly

understand all household duties? The daughters of a gentleman's family in olden times spent an hour or two every morning in the kitchen and in the laundry, and were initiated into the mysteries of pastry and pudding making, of preserving fruits, of ironing, etc. Their mothers' and their grandmothers' receipt-books were at their finger-ends. But now look at the picture: the daughters of a gentleman's family of the present day consider it very low and horridly vulgar to understand any such matters. It is just as absurd to ask a lady to play on the piano who has never been taught music, as to ask a wife to direct her servants to perform the duties which she herself knows nothing about. The duties of a wife cannot come either by intuition or by instinct more than music can. Again I say, every lady, before she is married, ought to be thoroughly taught her profession—the duties of a wife; she then would not be at the tender mercies of her servants, many of whom may be either unprincipled or inefficient.

Do not think I am overstating the importance of my subject. A good dinner—I mean a well-cooked dinner (which, be it ever so plain, is really a good dinner)—is absolutely essential to the health, to the very existence, of yourself and your husband; and how, if it be left to the tender mercies of the present race of cooks, can

you have it? High time it is that every wife, let her station be high or low, should look into the matter herself, and remedy the crying evil of the day. It is a pity, too, that we do not take a leaf out of the book of our neighbours the French. Every woman in France is a good cook; good cookery with them is a rule—with us it is the exception. A well-cooked dinner is a blessing to all who partake of it; it promotes digestion, it sweetens the temper, it cheers the hearth and home. There is nothing tries the temper more than an ill-cooked dinner; it makes people dyspeptic, and for a dyspeptic to be sweet-tempered is almost an impossibility. Let me, therefore, advise my fair reader to look well into the matter; 'either the gloom or the sunshine of a house depends much upon herself and upon her household management. Every girl, then, let her rank be what it may, ought above all things to be accomplished in housewifery, especially in the culinary department. "Poor creature!" quoth a wife, "for a man to be so dependent on his cook!" Poor creature he truly is, if bad cooking makes him dyspeptic, which, unless, he have the digestion of an ostrich, it assuredly will!

"Be like patience on a monument,  
Smiling at grief."

If wives do not cook the dinner themselves, they should surely know how dinners ought



to be cooked: and "it is not necessary to be cooks themselves, but a cause of good cooking in others." Half the household miseries and much of the dyspepsia in England would, if cookery were better understood, be done away with! There are heaps of good cookery books in the market to teach a wife how a dinner should be cooked. She has only to *study* the subject thoroughly and the deed is done, to the great happiness and well-being of herself and of her husband.

Every young wife should be able—ought to be instructed either by her mother or by some competent person—it should be a part of her education—to teach and to train her own servants aright. Unfortunately, in the present day, there is too much cant and humbug about the instruction of the lower orders, and domestic servants among the rest. They are instructed in many things that are perfectly useless to them, the knowledge of which only makes them dissatisfied with their lot, and tends to make them bad servants. Among other useless subjects taught them are the "ologies." It would be much more to the purpose if they were thoroughly instructed in all household duties, and in "the three R's—reading, 'riting, and 'rithmetic"—in obedience to their mistresses, and in simplicity of demeanour and dress. The servants themselves would be immensely benefited by such lessons.

A "blue-stocking" makes, as a rule, a wretched wife; it would be far better for the health of her husband, of herself, and her family if, instead of cultivating Latin and Greek, she would cultivate her household duties, more especially a thorough knowledge of the cooking department. "A man is, in general, better pleased when he has a good dinner upon his table than when his wife speaks Greek."—*Johnson*.

" From a morning that doth shine,  
From a boy that drinketh wine,  
From a wife that talketh Latine,  
Good Lord de'iver me."

Litany of the Darwin family, 1716.

As soon as a lady marries, the romantic nonsense of school-girls will rapidly vanish, and the stern realities of life will take its place, and she will then know, and sometimes to her grievous cost, that a *useful* wife will be thought much more of than either an *ornamental* or a *learned* one; indeed, a husband soon discovers that there is a "beauty in utility"—

" Thou shalt learn  
The wisdom early to discern  
True beauty in utility."—*Longfellow*.

It is better for a young wife, and for every one else, to have too much than too little occupation. The misfortune of the present day is, that

servants are made to do *all* the work, while the mistress of the house remains idle. Remains idle. Yes! and by remaining idle, remains out of health! Idleness is a curse, and brings misery in its train! How slow the hours crawl on when a person has nothing to do; but how rapidly they fly when she is fully occupied. We doctors know full well the difference there often is between the labour of a poor, hard-worked woman, and of a rich, idle lady: in the one case the labour is often quick and easy; in the other, it is often hard and lingering. Oh! if wives would consider betimes the importance of an abundance of exercise and of occupation, what an immense amount of misery, of pain, of anxiety, and anguish they might avert! Work is a blessed thing; if we do not work, we pay the penalty—we suffer “in mind, body, and estate.” An idle man or an idle woman is an object of the deepest pity and commiseration. A young wife ought, then, always to remember that—

“The way to bliss lies not on beds of down,”—*Quarles*.

And that—

“Sweet tastes have sour closes;

And he repents on thorns that sleeps on beds of roses.”

Longfellow graphically describes the importance and value of occupation; and as occupation is as necessary to a woman as to a man, I cannot resist transcribing it—

"Toiling — rejoicing — sorrowing,  
 Onward through life he goes ;  
 Each morning sees some task begun,  
 Each evening sees its close ;  
 Something attempted, something done,  
 Has earned a night's repose."

Truly may it be said that "occupation earns a night's repose." It is the finest composing medicine in the world, and, unlike an opiate, it never gives a headache; it never produces costiveness; and never, by repetition, loses, its effect. Sloth and restlessness, even on down, are generally bed-fellows—

"Weariness  
 Can snore upon the flint, when rusty sloth  
 Finds the down pillow hard."

The *mind* it is well known, exerts great influence over the body in promoting health, and in causing and in curing disease. A delicate woman is generally nervous; she is apt to make mountains of mole-hills; she is usually too prone to fancy herself worse than she really is. I should recommend my gentle reader not to fall into this error, and not to magnify every slight ache or pain. Let her, instead of whining and repining, use the means which are within the reach of all to strengthen her frame; let her give battle to the enemy; let her fight him with the simple weapons indicated in these pages, and the chances are she will come off victorious.

There is nothing like occupation, active occupation to cure slight pains—"constant occupation physics pain"—to drive away little ailments, and the dread of sickness.

What a blessed thing is work! What a precious privilege for a girl to have a mother who is both able and anxious to instruct her daughter, from her girl-hood upwards, in all household management and duties! Unfortunately in this our age girls are not either educated or prepared to be made wives—useful, domesticated wives. Accomplishments they have without number, but of knowledge of the management of an establishment they are as ignorant as the babe unborn. Verily, they and their unfortunate husbands and offspring will in due time pay the penalty of their ignorance and folly! It is, forsooth, unladylike, for a girl to eat much; it is unladylike for her to work at all; it is unladylike for her to take a long walk; it is unladylike for her to go into the kitchen; it is unladylike for her to make her own bed; it is unladylike for her to be useful; it is unladylike for her to have a bloom upon her cheek like unto a milkmaid! All these are said to be horribly low and vulgar and to be only fit for the common people! Away with such folly! The system of the bringing up of the young ladies of the present day is "rotten to the core." A wife looking "well to the ways of her household"

is, in an old Book, set forth in terms of great approbation:—"She openeth her mouth with wisdom; and in her tongue is the law of kindness. She looketh well to the ways of her household, and eateth not the bread of idleness. Her children arise up, and call her blessed; her husband also, and he praiseth her."

A wife's life is made up of little pleasures, of little tasks, of little cares, and little duties, but which when added up together, make a grand sum total of human happiness. She is not expected to do any grand work; her province lies in a contrary direction—in gentleness, in cheerfulness, in contentment, in housewifery, in care and management of her children, in sweetening her husband's cup of life, when it is, as it often is, a bitter one, in abnegation of self: these are emphatically a "woman's rights," her heritage, her jewels, which help to make up her crown of glory—

"The trivial round, the common task,  
Would furnish all we ought to ask;  
Room to deny ourselves; a road  
To bring us daily nearer God."—*Keble*.

There is in Crabbe's *Poems* a conversation supposed to take place between a husband and a wife which is very beautiful; it contains advice, both to husband and wife, of priceless value. I cannot



refrain from transferring the extract of it to these pages; the husband addresses the wife thus—

“Each on the other must in all depend,  
The kind adviser, the unfailing friend ;  
Through the rough world we must each other aid,  
Leading and lead, obeying and obey'd ;  
Favour'd and favouring, eager to believe  
What should be truth—unwilling to perceive  
What might offend—determin'd to remove  
What has offended ; wisely to improve  
What pleases yet, and guard returning love.”

If a young married lady, without having any actual disease about her, be delicate and nervous, there is no remedy equal in value to change of air—more especially to the sea coast. The sea-breezes, and if she be not pregnant, sea-bathing, frequently act like magic upon her in restoring her to perfect health. I say, if she be not pregnant; if she be, it would, without first obtaining the express permission of a medical man, be highly improper for her to bathe.

A walk on the mountains is delightful to the feelings and beneficial to the health. In selecting a seaside resort it is always well, where it be practicable, to have mountain air as well as the sea breeze. The mounting of high hills, if a lady be pregnant, would not be desirable, as the exertion would be too great, and if she be predisposed, might bring on a miscarriage; but the climbing of hills and mountains, if she be not *enceinte*, is

most advantageous to health, strengthening to the frame, and exhilarating to the spirits. Indeed, we may compare the exhilaration it produces to the drinking of champagne; with this difference—it is much more beneficial to health than champagne and does not leave the next morning, as champagne sometimes does, either a disagreeable taste in the mouth or headache behind—

“ Oh ! there is a sweetness in the mountain air  
And life, that bloated ease can never hope to share.”—*Byron*.

*Bugs and Fleas.* — This is a very commonplace subject, but, like most commonplace subjects, is one necessary to be known, as these pests of society sometimes destroy the peace, comfort and enjoyment of a person away from home. Many ladies who travel from home are made miserable and wretched by having to sleep in strange beds—in beds infested either with bugs or with fleas. Now, it will be well for a lady never to go any distance from home without having four things in her trunk, namely—(1) A box of matches in order, at any moment of the night, to strike a light, both to discover and frighten the enemy away. (2) A box of night-lights. Bugs never bite when there is a light in the room. It would therefore be well, in an infested room, and until fresh lodgings can be procured, to keep a night-light burning all night. (3) A packet of “*La Poudre Insecticide*,” manufactured in France, but which may

be procured in England, or Keating's insect powder, a preparation which, although perfectly harmless to the human economy, is utterly destructive to fleas. (4) A four-ounce bottle of oil of turpentine, a little of which, in case of a discovery of bugs in the bed should be sprinkled between the sheets and on the pillow. The oil of turpentine will, until fresh lodgings can be procured, keep the bugs at a respectable distance. Care should be observed, while sprinkling the sheets with the turpentine, not to have (on account of its inflammability) a lighted candle too near the bed. I know, from experience that bugs and fleas are, when ladies are away from home, a source of torment and annoyance, and am therefore fully persuaded of the value and importance of the above advice—

“ Yet let me flap this bug with gilded wings,

This painted child of dirt which stinks and stings.—*Pope*.

If it be not practicable for her to visit the sea coast, let her be in the fresh air—in the country air. Let her mornings be spent out of doors; and if she cannot inhale the *sea*-breezes, let her inhale the *morning* breezes.

“ The skies, the air, the morning's breezy call,

Alike are free, and full of health to all.”—*Brydges*.

A young wife is apt to take too much opening medicine; the more she takes, the more she requires, until at length the bowels will not act

without an aperient; hence she irritates the nerves of the stomach and bowels, and injures herself beyond measure. If the bowels be costive, and variety of food, and of fruit, and of other articles of diet, which I either have or will recommend in these pages, together with an abundance of air, and of exercise, and of occupation, will not open them, then let her give herself an enema, which she can without the slightest pain or annoyance, and with very little trouble, readily do, provided she have a proper apparatus, namely, "a self-injecting enema apparatus," one made purposely for the patient, to be used either by herself, or to be administered by another person. A pint of *tepid* water, with some soap and salad oil, is as good an enema as can be used, and which, if the first should not operate, ought to be repeated. The enema does nothing more than wash the bowels out, removing any offending matter, and any depression of spirits arising therefrom, and neither interferes with the stomach nor with the digestion. No family ought to be without a good enema-apparatus to fly to in any emergency. It should always be kept in good order and ready at hand. A glycerine enema is also often very useful. About a teaspoonful of glycerine is injected into the bowel by means of a small syringe. It acts quickly, is easily given, and the necessary apparatus takes up but little room.

There is another excellent remedy for habitually costive bowels, namely, the eating of *brown* bread—of bread made with *undressed* flour—that is to say, with the flour ground all one way—with flour containing the flour, the pollards, and the *fine* bran, with all therein contained of the grain of the wheat, except the very *coarse* bran. Many people are made costive and ill by the eating of bread made with the finest flour only. Bread made with the *undressed* flour stimulates the bowels to action, and is, besides, much more nourishing—undressed flour being much richer in phosphates than the perfectly dressed flour—than what is usually called *Best Firsts* or Biscuit Flour; and the phosphates are of vital importance to the different animal tissues and to the bones.

Some patients with very weak stomachs cannot properly digest *brown* bread—it makes them feel uncomfortable and aggravates their dyspeptic symptoms; but if the bowels be costive and the digestion be not overweak, *brown* bread is an admirable means of opening them. If millers could devise means to reduce the *whole* of the bran to an *impalpable* powder, they would be conferring an incalculable boon on suffering humanity, as then *all* the bran would be left in the flour—thus increasing the hygienic qualities of the bread.

Another admirable remedy for opening the bowels

of a costive patient is the drinking of cold water—drinking half a tumblerful or a tumblerful of cold water the moment she awakes in the morning, and at any other time during the day she feels inclined to do so. Many women do not drink nearly enough fluid.

A variety of diet will often regulate costive bowels better—far better—than physic; and will not—as drug aperients assuredly will—bind the bowels up more firmly than ever after the operation of the drug has once been accomplished.

If a young wife have costive bowels, let her, instead of either swallowing opening pills, or before even administering to herself an enema, try the effect of visiting the water-closet at one particular period regularly every morning of her life. It is surprising how soon, as a rule, the above simple plan will get the bowels into a regular state, so that, in a short time, both aperients and enemata would be perfectly unnecessary, to her great comfort and to her lasting benefit.

“How use doth breed a habit in a man,”

and in woman too. But if the bowels, without either medicine or enema, are to be brought into a regular state, patience and perseverance must be the motto, as it ought to be for everything else for which it is worth the striving. And it is



most important that ample time should be allowed for the bowels to act. It is a matter that cannot be satisfactorily done in a hurry. Much may be done to relieve habitual constipation by the judicious employment of massage to the abdomen. The good effect of the massage is sometimes increased by abdominal exercises. It need hardly be said that such treatment should only be resorted to on the advice and under the direction of a medical man.

If a wife's bowels be costive, she ought not to be anxious to take an aperient; she should wait a while, and see what Nature will do for her. Active purgatives, except in extreme cases, which only a doctor can determine, are very injurious.

In summing up my Advice to a Young Wife, I beg to give her the following inventory of some of the best physic to be found in the world:—Early retiring to bed and early rising: thorough morning ablution; good substantial plain food; great moderation in the use of stimulants; a cool and well-ventilated house, especially bedroom; an abundance of fresh air, exercise, and occupation; a cheerful, contented, happy spirit; all these are Nature's remedies, and are far superior and are far more agreeable than any others to be found in the *Materia Medica*. So true it is that Nature is, as a rule, the best doctor, and that a wife's health is pretty much as she herself chooses to

make it. Shakespeare graphically and truthfully remarks that—

“ Our remedies oft in ourselves do lie,  
Which we ascribe to Heaven ; the fated sky  
Gives us free scope ; only doth backward pull  
Our slow designs when we ourselves are dull.”

By adopting the dictates of reason and of common sense, many of the nervous, useless, lackadaisical, fine ladies will be unknown, and we shall have instead blooming wives, who will in due time become the mothers of hardy, healthy, happy children.

In the foregoing pages the burden of my song has been health—the preservation of health—the most precious of God's gifts, and one that is frittered away as though it were but of little value. Health ought to be the first consideration of all, and of every young wife especially, as, when she is married, her life, her health, are not altogether her own, but her husband's and her family's. Oh, it is a glorious gift, a precious boon, to be in the enjoyment of perfect health, and is worth a little care and striving to obtain.

In concluding the first division of my subject, let me entreat my fair reader to ponder well on what I have already said; let her remember that she has a glorious mission; let her thoroughly understand that if good habits and good rules be not formed and followed during the first year of

her wifehood, they are not at all likely to be instituted afterwards. The first year is the golden opportunity to sow the seeds of usefulness, to make herself healthy and strong, and to cause her to be a blessing, a solace, and a comfort to her husband, her children, and all around her. The wife's mission concerns the husband quite as much as it does the wife herself—

“The woman's cause is man's. They rise or sink  
Together. Dwarf'd or godlike, bond or free ;  
If she be small, slight-natured, miserable,  
How shall men grow ?—*Tennyson.*”

I cannot, in closing this introductory chapter, do better than quote the following graphic and truthful description of a good domestic wife—

“Yes, a world of comfort  
Lies in that one word, wife. After a bickering day  
To come with jaded spirit home at night,  
And find the cheerful fire, the sweet repast,  
At which, in dress of happy cheeks and eyes,  
Love sits, and, smiling, lightens all the board.”—*J. S. Knowles.*

Pope has painted an admirable portrait of a wife, which is well worth studying and engraving on the memory—

“She who ne'er answers till her husband cools,  
Or if she rules him, never shows she rules ;  
Charms by accepting, by submitting sways,  
Yet has her humour most when she obeys.”

George Herbert, two centuries and a half ago, beautifully describes his wife as—

“My joy, my life, my crown ;”

and truly a good wife is emphatically a man's joy, his life, and his crown!

There, is, too, in Wordsworth a most exquisitely beautiful description of what a woman, if she be perfect, ought to be, which I cannot refrain from quoting. It is a perfect gem, a diamond of the first water, brilliant and sparkling, without flaw or blemish—

“ A being breathing thoughtful breath—  
A traveller, betwixt life and death ;  
The reason firm, the temperate will,  
Endurance, foresight, strength and skill ;  
A perfect woman, nobly plann'd,  
To warn, to comfort, and command ;  
And yet, a spirit still, and bright,  
With something of an angel light.

# PART I.

## MENSTRUATION.

*Menstruation—"the periods"—is the manifestation, the proof positive, the sign manual of puberty; the due performance of which is, as a rule, necessary for health and for conception; it usually ceases during pregnancy, usually during suckling, and oftentimes during severe illness; it comes on generally to the day, and frequently to the very hour, every lunar month, for the space of about thirty years, and then disappears altogether; constituting, at its close, "change of life."*

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Menstruation plays a momentous part in the female economy. Sufficient attention has not hitherto been paid to this subject. I therefore purpose devoting this special chapter to its due and careful consideration, and would beg my fair reader's earnest attention to it. It is a matter that deeply concerns her, as the due performance of menstruation usually betokens health and happiness; while the converse frequently tells of ailments and misery.

Barren wives, principally among the "upper ten thousand," are very numerous—one wife in every ten wives being barren, being childless. Must there

not be some baneful influences at work to cause such a lamentable state of things?

"A tree is known by its fruit," so is a healthy womb—one capable of bearing a child—known usually by menstruation. If menstruation be, in every way, properly and healthily performed, there is, as a rule, no reason, *as far as the wife herself is concerned*, why she should not conceive, carry, and, in due time, bring forth a living child. Hence the importance of Menstruation, the subject on which we are now about to enter. Indeed, it is one of the most important that can engage the attention of every wife; for if menstruation be healthy, the womb is usually healthy, and the woman, as a rule, is healthy and capable both of conception and of child-bearing.

But to our subject. This is an important epoch in the life of a woman, and may be divided into three stages, namely—(1) The commencement of menstruation—of puberty; (2) the continuation, at regular periods, of menstruation—the child-bearing age; and (3) the close of menstruation, of child-bearing—"the change of life."

(1) The commencement of menstruation. A good beginning at this time is peculiarly necessary, or a girl's health may suffer. (2) The continuation of menstruation. A healthy continuation, at regular periods, is much needed, or conception, when she is married, may not occur. (3) The



close of menstruation. Great attention and skilful management is required to ward off formidable diseases, which at the close of menstruation—at “the change of life”—are more likely than at any time to be developed.

Whether, therefore, it be at the commencement, at the continuation, or at the close, watchfulness and care must be paid to the subject, or mischief may ensue.

Menstruation—“the periods”—the appearance of the catamenia or the menses—is then *one of the most important epochs* in a girl's life. It is the boundary line, the landmark between childhood and womanhood; it is the threshold, so to speak, of a *woman's* life. Her body now develops and expands, and her mental capacity enlarges and improves. She then ceases to be a child, and she becomes a woman. She is now, for the first time, as a rule, able to conceive.

Although puberty has at this time commenced, it cannot be said that she is at her full perfection; it takes eight or ten years more to complete her organisation, which will bring her to the age of twenty-three or twenty-five years. These perhaps are the best ages for a woman if she have both the opportunity and the inclination to marry. Women who marry between twenty and twenty-five are the most likely to bear healthy children.

If she marry when very young, marriage may

weaken her system, and may prevent a full development of her body. Parents ought, therefore, to persuade their daughters not to marry until they are of age—twenty-one.

They should instil into them that splendid passage from Shakespeare that—

“ Things growing are not ripe until their season.”

Sir Edward Sieveking has well said:—“ What wonder that the girl of seventeen or eighteen, whose bones are only half-consolidated, and whose pelvis, especially with its muscular and ligamentous surroundings, is yet far from maturity, loses her health after marriage, and becomes the delicate mother of sickly children? Parents who have the real interest and happiness of their daughters at heart ought, in consonance with the laws of physiology, to discountenance marriage before twenty; and the nearer the girls arrive at the age of twenty-five before the consummation of this important rite, the greater the probability that, physically and morally, they will be protected against those risks which precocious marriages bring in their train.”

If a lady marry late in life, say after she be thirty, the soft parts engaged in parturition are more rigid and more tense, and thus become less capable of dilatation, which might cause, for the *first* time, a hard and tedious labour. Again, when she marries late in life, she might not live

to see her children grow up to be men and women. Everything, therefore, points out that the age above indicated—namely, somewhere between twenty-one and thirty—is the most safe and suitable time for a woman to marry.

While talking about marriage, let me strongly urge a mother not to allow her daughter, if she be very delicate, to marry. It is particularly desirable that no girl who suffers, or has suffered, from symptoms of heart disease, should marry without consulting a medical man with reference to the condition of her heart.

Some forms of heart disease cause little or no trouble during pregnancy or labour, while others are made much worse by these conditions. Sometimes heart disease is not suspected until pregnancy has so aggravated it that marked symptoms are produced.

It is, therefore, wise to have the heart examined whenever a girl who, during childhood, having suffered from the conditions which produce heart disease—rheumatic fever, scarlet fever, St. Vitus's dance—contemplates marriage.

A man himself, too, should never contemplate marrying a woman unless she be healthy and of a healthy stock. If this advice were universally followed, how much happiness would be ensured, and how much misery would be averted! The consequences of marrying an unhealthy woman

are really terrible—to husband, to wife, and to progeny.

The assurance companies all speak in language not to be misunderstood, of the great stress they lay, in the assurance of a life, upon a healthy family. Their testimony is of immense weight, as, of course, the value of lives is their especial business.

A healthy family, in the selection of a wife, is far before a wealthy family; but, indeed, "health is wealth," and wealth most precious!

Let us pursue the subject of marriage a little further, as it is one of great importance. Feeble parents have generally feeble children; diseased parents diseased children; nervous parents nervous children;—"like begets like." It is sad to reflect that the innocent have to suffer, not only for the guilty, but for the thoughtless and for the inconsiderate. Disease and debility are thus propagated from one generation to another, and the race becomes woefully deteriorated. The above is a gloomy picture, and demands the efforts of all who love their country to brighten its sombre colouring.

It is true that people live longer now than formerly; but it is owing to increased medical skill and to improved sanitary knowledge keeping alive the puny, the delicate, and the diseased. Unfortunately, those imperfect creatures who swell the ranks of the

population will only propagate puny, delicate, and diseased progeny like themselves.

Diseased and delicate people have, then, no right to marry; if they do, a reckoning day will assuredly come, when they will have to pay the extreme penalty of their temerity and folly. Truly marriage is a solemn responsibility, and should not be entered into without mature consideration. Pure blood and pure mind are, in marriage, far above riches, or rank, or any other earthly possession whatever!

Menstruation generally comes on once every month—that is to say, every twenty-eight days; usually to the day, and frequently to the very hour. Some ladies, instead of being “regular” every month, are “regular” every three weeks. Each menstruation continues from three to five days; in some, for a week; and in others for a longer period. It is estimated that during each “monthly period,” from four to six ounces is, on an average, the quantity discharged.

A lady is more likely to conceive if she be “regular,” although there are cases on record where women have conceived who have never had their “periods;” but such cases are extremely rare.

Menstruation in this country usually commences at the ages of from thirteen to sixteen, sometimes earlier; occasionally as early as eleven or twelve; at other times later, and not until a girl be seven-

teen or eighteen years of age. Menstruation in large towns is supposed to commence at an earlier period than in the country, and earlier in luxurious than in simple life.\*

Menstruation continues for thirty, and sometimes even for thirty-five years; and, while it lasts, is a sign that a lady is liable to become pregnant—unless, indeed, menstruation should be protracted much beyond the usual period of time. As a rule, then, when a woman “ceases to be unwell,” she ceases to have a family; therefore, as menstruation usually leaves her at forty-five, it is seldom that after that age she has a child.

I have known ladies become mothers when they

\* “The first menstruation is the normal sign that the girl has become capable of conception and child-bearing. . . . At the same time there is a mental change, and the girl becomes more bashful and retiring. Neither the uterus, however, nor the pelvis, at once reach their full capacity for the discharge of their functions; they do not generally attain their full size till the age of about twenty. The age at which menstruation commences is influenced by climate, race and mode of life. The influence of climate has been exaggerated, but in hot climates the age is on the average two or three years earlier than in cold. . . . Luxurious living and early stimulation of the mental faculties tend to bring on menstruation at an earlier age, and thus the children of the rich and dwellers in towns commonly menstruate earlier than the poorer classes in the country. . . . In England more than half the number of girls first menstruate between the ages of fourteen and seventeen, and more than five-sixths between those of thirteen and nineteen, the average being a little above fifteen. Normally the discharge recurs at regular intervals, with the exception of periods of pregnancy and lactation, up to the menopause or climacteric period, which is commonly between the ages of forty and fifty, most frequently at about 48.”—*Galabin's Manual of Midwifery*.



have been upwards of fifty years of age; although they seldom conceive after they are forty-three, or, at all events, forty-five years old. I myself delivered a woman in her fifty-first year of a fine healthy child. She had a kind and easy labour, and was the mother of a large family, the youngest being at the time of her last confinement twelve years old.\* I also delivered a woman aged fifty-four of a healthy live child. "Dr. Carpenter, of Durham, tells us that he has attended in their confinements several women whose ages were fifty. 'I well recollect a case occurring in my father's practice, where a woman became a widow at forty-nine years of age. Shortly afterwards she married her second husband, and within twelve months of this time gave birth to her *first* child. These cases belong to the working classes.' "

In very warm climates, such as in Abyssinia and in India, girls menstruate when very young—at ten or eleven years old; indeed, they are sometimes mothers at those ages. But when it commences early, it leaves early; so that they are old women at thirty. "Physically, we know

\* "Some curious facts come to light in the Scottish Registrar-General's report in reference to prolific mothers. One mother, who was only eighteen, had four children; one, who was twenty-two, had seven children; and of two who were only thirty-four, one had thirteen and the other fourteen children; and, on the other hand, two women became mothers as late in life as at fifty-one, and four at fifty-two; and one mother was registered as having given birth to a child in the fifty-seventh year of her age."

that there is a very large latitude of difference in the periods of human maturity, not merely between individual and individual, but also between nation and nation—differences so great, that in some southern regions of Asia we hear of matrons at the age of twelve.”\*

In cold climates, such as Russia, women are said to begin to menstruate late in life, frequently not until they are between twenty and thirty years old. They are said frequently not to be “regular” oftener than three or four times a year, and that when it does occur, the menstrual discharge is generally sparing in quantity.

The menstrual fluid is not exactly blood, although, both in appearance and in properties, it much resembles it; yet in the healthy state it does not clot as blood does. It is a secretion from the womb, and when healthy, ought to be of a bright red colour, in appearance very much like blood from a recently cut finger.

Menstruation generally ceases *entirely* in pregnancy and during suckling. It also ceases in cases of extreme debility, and in severe illness, especially in consumption.

Some ladies menstruate during suckling; when they do, it may be considered not as the rule, but as the exception. It is said, in such instances, that they are more likely to conceive; and no

\* “De Quincey.”

doubt they are, as menstruation is an indication of a proneness to conception.\* Many persons have an idea that when a woman, during lactation, menstruates, her milk is both sweeter and purer. Such is an error. Menstruation during suckling is more likely to weaken the mother, and consequently to deteriorate her milk.

During "the monthly periods" violent exercise is injurious; iced drinks are improper; and bathing in the sea, and bathing the feet in cold water, and *cold* baths must be avoided, (even the warm bath must be used with caution. A hot bath during the early hours of the period can be used by those who suffer much pain, if care be taken that no chill be caught, but during the full flow baths should be avoided;) indeed, at such times as these no risks should be run, and no experiments should, for one moment, be permitted, otherwise serious consequences ensue. "The monthly periods" are times not to be trifled with, or woe betide the unfortunate trifler!

A lady sometimes suffers severe pains both just before and during her "poorly" times. When such

\* Observations made during the past few years have shown that about half the women who suckle their infants do not menstruate at all during the first ten or twelve months of suckling. About one out of every four nursing mothers menstruates *regularly*, whilst one out of every four menstruates at *irregular* intervals. A woman who does not menstruate at all during suckling is less likely to become pregnant while suckling than one who does menstruate during this period. Also of women who do menstruate during suckling, those who menstruate regularly are more liable to become pregnant than those who menstruate irregularly.

is the case, she may possibly not conceive until the pain is removed. She ought therefore to apply to a medical man for relief. When she is freed from the pain, she may in due time become *enceinte*.

The pale, colourless-complexioned, helpless, listless, and almost lifeless young ladies, who are so constantly seen in society, frequently have deficient, or profuse menstruation, or often none at all. Their breathing is short—they are soon “out of breath;” if they attempt to take exercise—to walk, for instance, either upstairs or up a hill, or even for half a mile on level ground, their breath is nearly exhausted—they pant as though they had been running quickly. They are ready, after the slightest exertion or fatigue, and after the least worry or excitement, to feel faint, and sometimes even to actually swoon away. Now such cases may, if judiciously treated, be generally soon cured. It therefore behoves mothers to seek medical aid early for their girls. If this advice had been early followed, how many a poor anæmic girl might have been saved from consumption, and from an untimely grave, and made a useful member of society; but alas! like many other things in this world, mothers will not “hearken unto counsel” until it be too late—too late; and then, at the eleventh hour, Doctors are expected to work miracles! Anæmic girls, who suffer from scanty pale-coloured menstruation should always be treated until the anæmia has disappeared.

There is an evil practice which, as it is very general, requires correction, namely, the giving of alcoholic stimulants by a mother to her daughter at the commencement of each of "her periods;" more especially if she be in much pain. This practice often leads a girl to love spirits—to become in course of time, a drunkard. There are other remedies, not at all injurious, that medical men give at these times, and which will afford both speedier and more effectual relief than a stimulant.

In a pale, delicate girl or wife, who is labouring under what is popularly called *poverty of blood*, the menstrual fluid is sometimes very scant, at others very copious, but is in either case, usually very pale—almost as colourless as water, and the patient may be very nervous and even hysterical. Now, these are signs of great debility; but, fortunately for such a one, a medical man is, in the majority of cases, in possession of remedies that will soon make her all right again.

A delicate girl has no right, until she be made strong, to marry. If she should marry, she will frequently, when in labour, not have strength, *unless she has help*, to bring a child into the world; which provided she be healthy and well formed, ought not to be. How graphically the Bible tells of delicate woman not having strength to bring children into the world: "For the children are come to the birth, and there is not strength to bring forth."—2 Kings xix. 3.

The menstrual discharge, as before remarked, ought, if healthy, to be of the colour of blood—of fresh unclotted blood. If it be too pale (and it sometimes is almost colourless) and either too scanty or too excessive, a medical man ought to be consulted, who will in the generality of cases, be able to remedy the defect. Provided that menstruation is not excessive or too frequent, the mere fact of irregularity is not in itself necessarily of any serious consequence. Such a condition only calls for special investigation and treatment if other symptoms of ill-health are present, or if the patient fails to become pregnant. The periods may be entirely absent—as during pregnancy and nursing—and yet the patient may be in robust health. On the other hand, excessive menstruation should always receive prompt medical attention, as it may be caused by serious disease of the womb, which, in some instances, can only be satisfactorily treated at an early stage. Let me repeat, if the periods are excessive in quantity, or too prolonged, or too frequent in occurrence, medical advice should be sought at once, or very serious consequences—perhaps a fatal result—may ensue. The same holds good if there be a watery or blood-stained discharge between the periods.

A married lady is very subject to “the whites;” the more there is of “the whites” the less there will usually be of the menstrual discharge; so that,



in a bad case of "the whites," menstruation might entirely cease, until proper means be used both to restrain the one and to bring back the other. Indeed, as a rule, if "the periods," by proper treatment, be healthily established and restored, "the whites" will often cease of themselves. This discharge is, in the vast majority of cases, due to excessive secretion from the vagina or neck of the womb. It is generally natural in quality, but excessive in quantity. It is often due to some condition of general ill-health, such as anæmia, which frequently causes disordered menstruation; hence, the two conditions, "the whites" and disordered menstruation, are often found together, and both conditions will be cured by treating the general health. It is a mistake to think that "the whites" cause ill-health; it is generally the other way about, the ill-health really causes "the whites."

"The Whites" may be the result of costive bowels. Remedy the constipation and "the whites" soon disappear.

"The periods" at other times are either too profuse or too long continued. Either the one or the other may be associated with barrenness, and is also weakening to the constitution, and thus tends to bring a lady into a bad state of health. This, like the former cases, by judicious management may generally be remedied; and being remedied, will in all probability result in the wife becoming a mother.

When a lady is neither pregnant nor "regular" she ought to apply to a doctor, as there may be something wrong that can be put right.

When a lady is said to be "regular" it is understood that she is "regular" as to *quality*, and *quantity* and *time*. If she be only "regular" as to the *time*, and the *quantity* be either deficient or in excess, or if she be "regular" as to the *time*, and the *quality* be bad—too pale—she had better get medical advice, particularly if her general health is not good, or if she has failed to become pregnant.

A neglected miscarriage is a frequent cause of unhealthy menstruation, and until the womb, and in consequence, "the periods," by judicious treatment, be made healthy, there is indeed but scant chance of a family or of good health.

Excessive, prolonged, or too frequent menstruation is due to a variety of causes. Sometimes, it is true, these symptoms are of comparatively little importance, but they often denote serious disease of the womb, especially in women who have had children. There is no way of distinguishing between the cases in which excessive, or too frequent menstruation is an indication of serious trouble and those in which it is of slight importance without a thorough medical examination. It is an unfortunate fact that some of the most fatal diseases of the womb do not produce pain until the disease has advanced too far for a cure to be possible.

Hence let me urge all to be on the safe side and to get a medical opinion *as soon as possible* whenever menstruation is excessive or too prolonged or too frequent, or whenever there is a watery or blood-stained discharge between the periods, whether pain be present or not, and whether the loss of blood or the discharge be offensive to the smell or not.

Hæmorrhage, after sexual intercourse, in one who is not newly married, is also a symptom of the very gravest importance, and should immediately be followed by a medical examination, as in most cases it means cancer. If this examination were always promptly made in such cases, many lives would be saved every year. One well understands, and thoroughly appreciates, the natural reluctance of a sensitive woman to an unnecessary examination; but an unnecessary examination is infinitely preferable to the overlooking of serious disease until it is too late to avert a fatal termination. Cases like the following are constantly being seen by medical men. A woman notices that her menstruation is excessive or too frequent, but, *as she suffers no pain*, she puts off consulting her medical man for some weeks or months. When at last an examination is made, serious disease of the womb is discovered, which is too far advanced, to admit of a cure, but which might have been cured if suitable treatment had been adopted at an earlier stage.

I have no doubt that—among fashionable ladies—alcohol, which some take in quantities “to keep them up to the mark,” as they call it, is one great cause of hysteria. And why is it so? Alcohol, at all in excess, depresses the system, and thus predisposes it to hysteria and to other nervous affections.

A lady who is not a votary of fashion, and who is neither a spirit-drinker nor a wine bibber, may have hysteria—one, for instance, who has naturally a delicate constitution, or who has been made delicate by any depressing cause.

A large family of children, repeated miscarriages, and profuse menstruation are three common causes of hysteria; indeed, anything and everything that produces debility may induce hysteria.

There are two classes of wives most liable to hysteria, namely, those who have had too many children, and those who have had none at all. Both these conditions of wifehood are detrimental to health; but of the two the childless wife is far more liable to hysteria and to many other diseases than is the prolific mother.

I will enumerate a few of the symptoms of hysteria to show its Protean form; if I were to dwell on all the symptoms, this book would not be large enough to hold them. The head is often attacked with frightful pains, especially over one eyebrow; the pain is said to resemble that of the

Driving of a nail into the skull. The patient is low-spirited and melancholy, and, without rhyme or reason, very tearful. She likes to mope in a corner, and to shun society, and looks gloomily on all things. She is subject to chokings in the throat—she feels as though a ball were rising in it. If this sensation should be intensified she will have a hysterical paroxysm.\* She has at times violent palpitation of the heart—making her fancy that she has a diseased heart, when she has nothing of the kind. She has short and hurried breathing. She has pains in her left side, under the short ribs. She has oftentimes violent pains of the bosom—making her very unhappy, as she firmly believes that she has cancer of the breast. She has noisy eructations and belchings of “wind,” and spasms of the stomach and rumblings of the bowels. She has neuralgic pains in different parts of the body, first in one place, then in another, so that there is not a single part of her body which has not been more or less affected at some period or other.

Hysteria frequently simulates paralysis, the patient complaining that she has suddenly lost all power in her arm or her leg, as the case may be. The paralytic symptom generally leaves as quickly

\* I have dwelt so largely on the symptoms of a *fit* or *paroxysm* of hysteria in one of my other books—*Advice to a Mother*—that I need not say more upon it in this work. I therefore beg to refer my reader, interested in the subject, to that volume.

as it comes, only to show itself again after the slightest worry or excitement, and sometimes even without any apparent cause whatever.

Hysteria will sometimes mimic either tetanus, or one particular form of tetanus, namely, lock-jaw; so that the patient's body, in the one case, will become bent like a bow—she resting the while on her head and feet; or, in the other case the jaws will be locked as in lock-jaw; but both the one and the other are unlike either tetanus or lock-jaw, as the two former are both evanescent and unattended with danger; while the two latter, if real, are of longer continuance, and are most perilous.

There is another common symptom of hysteria, which is, the patient passing an immense quantity of clear, colourless, limpid urine, like water, the hysterical patient sometimes filling, in a very short time, a *pot-de-chambre*.

Flatulence is sometimes the torment of her life; it not only causes much discomfort, but frequently great pain. The wind rumbles about the bowels outrageously; first in one place, then in another, and then rising in volumes to her throat, almost chokes her. Her abdomen is, at times, as largely distended as though she were advanced in pregnancy.

There is another peculiarity of hysteria which is very characteristic of the complaint, namely, a hysterical patient is afraid to go either to church



or to any other place of worship. If she should venture there, she feels as if she should be smothered or suffocated, or as though the roof were going to fall upon her, and, at the sound of the organ, she is inclined either to swoon away or to scream outright. Whenever she does go to church she likes to sit near the door in order that she may have plenty of air, and that she may be able, if she feel so inclined, to leave the church at any moment—she having no confidence in herself. The going to church, then is with many a hysterical patient a real agony, and sometimes even an impossibility. Many persons cannot understand the feelings of hysterical patients not wishing to go to church; but doctors, who see much of the complaint know that feeling thoroughly, and can enter into and appreciate the horrors they at such times experience.

Many diseases that are considered by ladies to be desperate are purely hysterical, and are amenable to treatment. It may be well to state that hysteria may be real or feigned, or it may be a mixture of the two—partly real and partly feigned. It is, with single girls, frequently feigned; with married women it is usually real, and unless relieved, it is the misery of their lives.

Although, in some instances, all the symptoms above enumerated may be present; in others, some, or even many, of the symptoms may altogether

be absent, and yet the complaint may decidedly be a case of genuine hysteria.

There is one consolation for a patient who is hysterical: hysteria is curable; while many other diseases that may counterfeit hysteria are incurable. All doubtful cases require the careful investigation of a judicious and experienced medical man to decide: but whether a case be hysteria, or otherwise skilled treatment is absolutely needed.

Sydenham, with his usual shrewdness, remarks that hysteria is "constant only in inconstancy;" for there is scarcely a disease under the sun that hysteria does not imitate, and that, sometimes, most accurately. Truly, hysteria is the most accomplished and versatile actress of the day; she is, at one moment, tragic; she is, the next, comic; she is—

"Everything by starts, and nothing long."

There is among young wives, of the higher ranks, of the present time, much hysteria; indeed, it is among them, in one form or another, the most frequent complaint of the day. Can it be wondered at? Certainly not. The fashionable system of spending married life—such as late hours, close rooms, excitement, rounds of visiting, luxurious living—is quite enough to account for its prevalence. The menstrual function in a case of this kind is often not duly performed; it is either too much or too little in quantity; "the periods" occur too soon or too late, or at irregular periods. Oh, it

is sad to contemplate the numerous victims that are sacrificed yearly on the shrine of fashion! The grievous part of the business is, that fashion is not usually amenable to reason and common sense; argument, entreaty, ridicule, are each and all alike in turn powerless in the matter. Be that as it may, I am determined boldly to proclaim the truth, and to make plain the awful danger of a wife becoming a votary of fashion.

Many a lady who is now hysterical and dyspeptic, weak and nervous, looking wretched, and whose very life is a burden, may, by applying to a medical man, be restored to health and strength.

Menstruation is the gauge whether the womb be sound or otherwise; it is an index, too, that may generally be depended upon, quite as much as the fruit on a tree indicates whether the tree be healthy or 'diseased. If such be true, and it cannot be gainsaid, menstruation may be considered one of the most important questions that can engage the earnest attention of both doctor and wife; but unfortunately it is one that has hitherto been grievously neglected.

### SEXUAL HYGIENE.

This is a section which is addressed to the young wife or to the woman about to become a wife in order to make the change from single life to married life a less abrupt one; and to warn her against

practices which may result in harm to her health.

It is necessary to speak of these things plainly as many a girl has only learnt after marriage of the many vicissitudes through which she has to pass.

By sexual hygiene is meant, the proper care and attention which should be bestowed upon the generative organs, thereby ensuring that their functions shall be healthily carried out to the best advantage.

The primary function of the womb is the provision of a healthy home, wherein the tiny embryo can be lodged and nourished until it becomes the full-term child ready to be born. With this important function to carry out it is apparent at once how important it is that the greatest care should be taken of this organ on which the whole world hangs, and it is the object of this section of the work to guide the young wife in the preservation of the health of this particular organ. How often one sees the functions of the womb ruthlessly upset by indiscretions which hardly ignorance itself can excuse.

The care of the womb begins with the establishment of the monthly courses. The periods are nature's effort to keep the interior of the womb always fresh and clean and ready for the reception of the 'little stranger,' and many girls have deranged this function by not taking life easily, and by not giving up their horse-exercise, baths, gym-

nastics, etc., at this time; granted, there are many people who can do all these things with apparent impunity, but there is often a time of reckoning for them and for those who try to copy their example.

*Baths during menstruation.*—Cold baths and sea bathing during the monthly period must be avoided. For those who suffer great pain especially during the outset of the period, a hot bath is a welcome relief and may be indulged in, but it is wiser to avoid a bath during the full flow of the period, though a quick hot bath may be used during the last day or so, but great care must be exercised that a chill be not taken.

*Marriage and its fulfilment.*—The fundamental principle of marriage is the procreation of children, and it is to that question that the present section of this work is directed. When the single girl becomes the married woman and wife, it is very necessary that the toilet and cleansing of the sexual organs should be most carefully performed. It is the person who is careless in her personal cleanliness that is liable to become a sufferer from that too prevalent disorder known as the 'whites,' a disease due to germs making a permanent residence of the genital canal. During the morning bath the organs should be carefully washed and soaped and thoroughly rinsed with warm water. The use of syringes in injecting fluids into the

genital canal is to be deprecated, as careless syringing is often the starting point of inflammations owing to the use of irritative fluids injected often with cold water, and with an unclean apparatus. The use of a syringe should never be started without medical advice. The wife during the monthly period should keep quiet and as far as possible rest and after the period is over she should thoroughly bathe herself, and live apart from her husband for quite three days, as too soon intercourse may bring about a re-appearance of the period. The law of Moses enacted that a woman was 'unclean' until the seventh day after the 'issue' had ceased. Excitement or over-fatigue should not be indulged in within a day or so of the expected time of a period by a woman who is anxious to conceive as this very often brings about an early miscarriage or flooding. Intercourse should not be indulged in by a pregnant woman at the time when a period would have been expected as the womb is then prone to be overexcitable and may throw out its contents. Marriage should be arranged to take place some few days after the monthly period has stopped, as sometimes it happens that the bustle and excitement of the preparations for the wedding may cause the period to appear a week before its time. For the fecundity of marriage it is necessary that intercourse should take place, and in the early days of married life this is often accom-



panied with some degree of pain. In all single persons there is a more or less complete barrier within the genital passage which, until rupture takes place, prevents complete intercourse, and this breaking down of the barrier is accompanied with pain varying in different individuals and there is usually some bleeding. This latter should be mentioned as otherwise the linen may be stained.

Should the first intercourse be accompanied by much pain the act should not be repeated for a few days, to give the delicate tissues time to heal. If intercourse after some weeks of married life be incomplete or accompanied by pain, it is probable that there is some barrier present which may need medical intervention for its relief. Also should intercourse be repeatedly followed by hæmorrhage the advice of a doctor must be sought, as this latter symptom is often a warning that disease is present.

One is often asked how often the sexual act should be repeated, and it is a difficult question to answer as constitutions vary so much, and what may be 'one man's meat may be another man's poison.' Sexual congress is primarily intended for the procreation of children, but it may be that for various reasons, such as recent pregnancy, ill-health, etc., that it is inadvisable for a patient to become pregnant, and then again the question is raised how to prevent conception, and the answer

would be that pregnancy is less likely to take place at the middle of the intermenstrual period. It would appear that the usual frequency of the repetition of the sexual act is about 3—4 times a month, though often the act is indulged in more frequently, without deterioration of health. If the act is followed by headache, lassitude or other symptoms it is a sign that the act must not be too soon repeated.

The trend of modern thought, however, especially in the upper strata of society, is how to prevent conception and not how to bring it about, and for this purpose many noxious articles are used, which while in many cases effecting their object tend to bring about an unhealthy state of the female organs, I refer to the classes of substances known as 'preventatives.' These are inserted into the passage and there, unless great cleanliness be observed, decompose and give rise to a train of ailments often ending in the permanent ill-health of the wife with subsequent power of procreation absolutely destroyed. Many a case of an 'invalid wife' can be traced to the use of checks and other quack remedies.

#### CHANGE OF LIFE, OR PREGNANCY, OR DISEASE OF THE WOMB.

How is a patient to distinguish, at about the time of her "ceasing to be unwell," if she be really pregnant, or merely going through the pro-

cess of "change of life," or if she have a tendency to a diseased womb? The case must be taken in all its bearings; the age of the patient; the symptoms of pregnancy, over and above the cessation of menstruation, or the absence of such symptoms; "the periods;" the sudden general fatness of the patient, or otherwise; the general state of her health. Women at the "change" frequently suffer from nervous and other troubles—pains in the breast, discharge from the womb, pelvic or uterine pains. They fancy they have tumours, disease, cancer even. In the majority of instances the case is simply the loss of balance between the several functions. For a time the harmony usually working between the various organs is disturbed. The nervous system often gives the most prominent evidence of this disorder. It is important to recognize this truth: Disorder does not necessarily mean disease.

*The Age.* It is comparatively rare for ladies to conceive after the age of about forty-three years. For conception to occur after that age—it does, however, sometimes—is considered the exception, and not the rule.

*The symptoms of pregnancy.* These must be carefully studied, and as I shall have to go over them in a subsequent part of this book, I beg to refer my fair readers to those paragraphs; I am alluding, of course, to the other symptoms described, besides cessation of menstruation.

"*The periods.*" It being the "change of life," the periods have for some time been irregular, that is to say, have not come on regularly as was their wont, 'occurring more frequently or less frequently; the loss being larger or smaller in quantity than it used to be: in point of fact, the patient is now neither "regular" as to time nor as to quantity, but varies in a most uncertain manner in both respects.

*The sudden general fatness of the patient.* A lady at the "change of life" frequently becomes suddenly fat; there is not a bone to be seen, she is cushioned in fat; her chin especially fattens, it becomes a double chin; she is "as fat as butter." A patient who is pregnant, particularly when late in life, frequently becomes, except in the abdomen, thin and attenuated: her features, her nose and chin especially, have a pinched and pointed appearance; very different to the former case.

(By way of parenthesis I may say,—There is one consolation for a lady who has a child late in life: it frequently, after it is over, does her health great good, and makes the "change of life" pass off more favourably and kindly than it otherwise would have done. A lady who late in life is in the family way requires consolation, for she usually suffers, at such times, very disagreeable symptoms, which make her feel very wretched. So that for her there is often—as there is in most all other affairs in the world—compensation).

*The general state of the health* must be taken into consideration. The patient may neither be pregnant nor be labouring under the symptoms of "change of life" alone, but there may be other causes in operation as well, namely, threatening symptoms of a diseased womb, indicated by bearing down of the womb, by severe "whites," and by other disagreeable discharges from the womb, which will require the care and treatment of a medical man skilled in such matters to cure or to relieve. A doctor should, in all doubtful cases, be at once consulted, as early treatment in womb affections is a great element of success.

It should be borne in mind, too, that diseases of the womb are very apt to show themselves at the "change of life." These facts should make a wife at such times doubly diligent, as "to be forewarned is to be forearmed," and thus to be prepared, in all doubtful cases, by calling in advice in time for any and for every emergency and contingency that may arise. How much misery and ill-health might, if this counsel were followed, be averted!

### THE "CHANGE OF LIFE."

As soon as a lady ceases to be "after the manner of women"—that is to say, as soon as she *ceases to menstruate*—it is said that she has "a change of life," and if she does not take proper care she will

soon have "a change of health" to boot, which in all probability will be for the worse. "Change of life" is sometimes called "the critical period." It well deserves its name—it is one of the critical periods of a woman's life, and oftentimes requires the counsel of a doctor experienced in such matters to skilfully treat.

After a continuation of about thirty years of "the periods" a woman *ceases to menstruate*—that is to say, when she is about forty-four or forty-five years of age, and, occasionally, as late in life as when she is forty-eight years of age, she has "change of life," or, as it is sometimes called, "a turn of years"—"the turn of life." Now, before this takes place, she oftentimes becomes very "irregular"; she is at one time "unwell" before her proper period; at another time either before or after; so that it becomes *dodging time* with her, as it is styled. In a case of this kind menstruation is sometimes very profuse; it is at another very sparing; it is occasionally light-coloured—almost colourless; it is sometimes as red as from a cut finger; while it is now and then dark and as thick as treacle.

When a lady is about having the "change of life," violent flooding is apt to come on—as profuse as though she were miscarrying. Thus violent flooding is often the *finale* of her "periods," and she sees no more of them.



Others, again, more especially the active and abstemious, suffer so little at "change of life," that, without any premonitory symptoms whatever, it suddenly, in due time, leaves them—they the while experiencing neither pain nor inconvenience.

A lady at the "change of life" usually begins to take more food; fat more especially accumulates about the bosom and about the abdomen, thus giving her a matronly appearance, and, now and then making her believe that she is *enceinte*, especially if the "wish be father to the thought." So firmly has she sometimes been convinced herself of being in an interesting condition that she has actually prepared baby-linen for the expected event, and has even engaged her monthly nurse. Now, it would be well, before such a one makes up her mind that she is really pregnant, to consult an experienced doctor in the matter, and then her mind would be set at rest, and all unpleasant gossip and silly jokes be silenced. *Skilled* knowledge in every doubtful case is the only knowledge worth the having; the opinion of old women in such matters is indeed of scant value.

She has peculiar pains, sometimes in one place and then in another; the head is often affected, at one time the back, at another time the front, over the eyes, light and noise having but little or no effect in aggravating the headache. She is very "nervous," as it is called, and has frequent flutterings of the heart and sudden flushings of the face

and neck—causing her to become, to her great annoyance, as red as a peony! The nervous symptoms at the “change of life” often involve intense mental suffering. The patient frequently imagines that she is becoming insane. With due treatment all this passes off.

She has swellings and pains of her breast, so as often to make her fancy that she has some malignant tumour there. She is troubled much with flatulence and with pains, sometimes on the right and at other times on the left side of the abdomen. The flatulence is occasionally very troublesome so as to cause her to shun society and to make her life almost burdensome; she has not only “wind” in the bowels, but “wind” in the stomach, which frequently rises to her throat, making her sometimes hysterical. Indeed, she is often hysterical—a little thing making her laugh or cry, or both the one and the other in a breath. She has frequently pains in her left side—in the region of the short ribs. She has pains in her back—in the lower part of her back, and low down in her abdomen.

The nose is, at these times, very much inclined to bleed, more especially at what was formerly her “periods.” Nature is doing all she can to effect relief, and, therefore, should not be meddled with unnecessarily. The nose should be allowed to bleed on, unless, indeed, the bleeding be very profuse.

Eruptions of the skin, more especially on the face, are at such times very apt to occur, so as to make a perfect fright of a comely woman; there is one comfort for her—the eruption, with judicious treatment, will gradually disappear, leaving no blemish behind.

The above symptoms, either a few or all of them, at the “change of life” are of common occurrence, and require the assistance of a doctor experienced in such matters. If they be properly treated, such symptoms will gradually subside, leaving her in excellent health—better, probably, than she has been in for years, more especially if her constitution has been previously weakened by repeated child-births.

We sometimes hear of a lady being “fat, fair and forty.” Now, when a wife at the age of forty suddenly becomes very fat, however “fair” she may be—and she is often very fair—she seldom has any more family, even though she be “regular.” If such a one had, before the fat had accumulated, taken more outdoor exercise she would, in all probability, have kept her fat down. Active, bustling women are seldom very fat, and sometimes have their “periods” until they are fifty years of age; indeed they occasionally bear children at that age, and have splendid confinements. How true it is that luxurious living and small families, and hard and tedious labours and premature decay,

often go hand in hand together! But so it is, and so it always will be; luxury draws heavy bills on the constitution, which must eventually be paid, and that with heavy and with compound interest.

Bleeding piles are very apt to occur at the "change of life"; they frequently come on periodically. Now, bleeding piles at such times as these, may be considered as an effort of Nature to relieve herself, and therefore, need not, unless very violent, be interfered with, and certainly not without the consent of a judicious medical man. Meddling with Nature is a dangerous matter, and is a hazardous game to play!

When "change of life" begins—during its continuance, and for some time afterwards—a lady labours at times, as above stated, under great flushings of heat; she, as it were, blushes all over; she gets very hot and red, almost scarlet, then perspires, and afterwards becomes cold and chilly. These flushings occur at very irregular periods; they may come on once or twice a day, at other times only once or twice a week, and occasionally only at what would have been her "periods." They are occasionally attended with hysterical symptoms. A little appropriate medicine is desirable. A lady while labouring under these heats is generally very much annoyed and distressed; but she ought to comfort herself with the knowledge that they are not of a serious nature.

The "change of life," then, is one of the most important periods of a lady's existence, and generally determines whether, for the rest of her days, she shall either be healthy or otherwise. It therefore imperatively behoves her to pay attention to the subject, and in all cases, when it is about to take place, to consult a medical man, who will, in the majority of cases, be of great benefit to her, as he will be able not only to relieve the symptoms above enumerated, but to ward off many important and serious diseases to which she would otherwise be liable. When the "change of life" ends favourably, which, if properly managed, it generally does, she may improve in constitution, and may really enjoy better health and spirits, and more comfort than she has done for many previous years. A lady who has during her wifhood eschewed fashionable society, and who has lived simply, plainly, and sensibly, who has avoided stimulants, and who has taken plenty of outdoor exercise, will during the autumn and winter of her existence reap her reward by enjoying what is the greatest earthly blessing—health! Not only her health will be established, but her comeliness and youthfulness will be prolonged. Although she may not have the freshness and bloom of youth, which is very evanescent, she will probably have a beauty of her own, which is oftentimes more lasting than that of youth, telling of a well-spent life—

"And yet 'tis said, there's beauty that will last  
When the rose withers and the bloom be past. — *Crabbe*;

It is surprising how soon a fashionable life plants crow-feet on the face and wrinkles on the brow; indeed, a fashionist becomes old before her time; and not only old, but querulous and dissatisfied. Fashion is a hard, and cruel, and exacting creditor, who will be paid to the uttermost farthing—

"See the wild purchase of the bold and vain,  
Whose every bliss is bought with equal pain." — *Juvenal*.

With regard to stimulants during the "change of life," let me raise my voice loudly against the *abuse* of them. Beyond a very moderate quantity they become, during the period of the "change of life," positively injurious. There is a great temptation for a lady during that time to take a stimulant, for she feels weak and depressed, and it gives her temporary relief; but, alas! it is only temporary relief—the excitement from it is evanescent, and aggravated depression and increased weakness are sure to follow in the train of the *abuse* of it.

Although many women at the "change of life" derive some benefit from taking a stimulant, others, at such times, are better without any stimulant whatever. When such be the case, let them be thorough teetotalers. A tumblerful or two of fresh milk during the twenty-four hours is, for those



who cannot take a stimulant, an excellent substitute. Excessive or too frequent menstruation is a common natural condition at the "change of life": but it is important to remember that the most serious disease of the womb, which also produces excessive or too frequent menstruation, is particularly liable to attack women at this period of life. It is therefore, most important for any woman who suffers in this way at the "change of life" to settle the matter at once by submitting to a medical examination; the risk of waiting is far too great to be justifiable. In such cases untold harm is often done by the advice of ignorant friends. Over and over again cases are seen of women, who are really suffering from serious disease of the womb, but who have been persuaded by their friends to look upon their symptoms as merely due to the "change of life," until it is too late for anything to be done for them. If the number of women who are thus every year sacrificed to the ignorance of their friends could be ascertained, we should probably be appalled by its magnitude. It is perfectly heart-breaking for a medical man to see the same tragedy enacted again and again before his eyes. In this respect a woman's friend may be, and often is, her worst enemy. This matter is so important that it will be wise to repeat again that a medical examination is called for in the following conditions, whether pain be present or not:—

1. If menstruation is excessive in quantity; lasts too long; occurs too frequently.
2. If there is hæmorrhage after sexual intercourse in a woman who is not recently married.
3. If there is a watery or an offensive discharge from the vagina.

## PART II.

### PREGNANCY.

*Of the fruit of thy body.*—THE PSALMS.

*The fruitful vine.*—THE PSALMS.

*The fruit of the womb.*—GENESIS.

*The children which were yet unborn.*—THE PSALMS.

*Thy children within thee.*—THE PSALMS.

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### SIGNS OF PREGNANCY.

The first sign that leads a lady to suspect that she is pregnant is her *ceasing-to-be-unwell*. This, provided she has just before been in good health, is a strong symptom of pregnancy; but still, there must be others to corroborate it.

A healthy married woman, during the period of child bearing, suddenly *ceasing-to-be-unwell*, is of itself alone almost a sure and certain sign of pregnancy, requiring but little else besides to confirm it. This fact is well known by all who have had children. They base their predictions and their calculations upon it, and upon it alone, and are seldom deceived.

But as *ceasing-to-be-unwell* may proceed from other causes than that of pregnancy, such as disease or disorder of the womb or of other organs of the body—especially of the lungs—it is not by itself

alone entirely to be depended upon; although, as a single sign, it is, especially if the patient be healthy, one of the most reliable of all the other signs of pregnancy. It is possible, but rare, for the periods to go on for two or three months after pregnancy has taken place. If the periods occur *regularly*, pregnancy is exceedingly improbable, no matter what other symptoms of pregnancy may happen to be present. It not infrequently happens that a "period" is missed immediately after marriage without pregnancy having occurred. It is therefore wise for a newly-married woman to wait and see whether a second period is missed before concluding that she is really pregnant.

The next symptom is *morning sickness*. This is an early symptom of pregnancy. It sometimes occurs a few days, and indeed generally not later than a fortnight or three weeks after conception. It is frequently distressing, oftentimes amounting to vomiting, and causing a loathing of breakfast. This sign usually disappears after the first three or four months. Morning sickness is not always present in pregnancy; but, nevertheless, it is a frequent accompaniment, and many who have had families place more reliance on this than on any other symptom. Being one of the earliest, if not the very earliest, symptom of pregnancy, it is, by some ladies, taken as their starting-point from which to commence making their "count."

A lady who has once had *morning sickness* can often for the future distinguish it from each and from every other sickness; it is a peculiar sickness, which no other sickness can simulate. Moreover, it is emphatically a *morning sickness*—the patient being, as a rule, for the rest of the day, entirely free from sickness or from the feeling of sickness.

A third symptom is *shooting, throbbing, and lancinating pains in, and enlargement of the breasts, with soreness of the nipples*, occurring about the second month. In many instances, after the first few months, a small quantity of watery fluid, or a little milk, may be squeezed out of them. This latter symptom, in a *first* pregnancy, is valuable, and can generally be relied on as fairly conclusive of pregnancy. It is not so valuable in an *after* pregnancy, as a *little* milk may remain in the breasts for some months after a lady has weaned her child, even should she not be pregnant.

*Secretion in the breast*, however small it may be in quantity, especially in a first pregnancy, is a reliable sign—indeed, I might go so far as to say an almost certain sign—of pregnancy.

The veins of the breast look more blue, and are consequently more conspicuous than usual, giving the bosom a mottled appearance. The breasts themselves are firmer and more knotty to the touch. The nipples, in the majority of cases, look more *healthy* than customary, and are

somewhat elevated and enlarged; there is generally a slight moisture upon their surface, sufficient in some instances to mark the linen.

A dark brown areola or disc may usually be noticed around the nipple, the change of colour commencing about the second month. The tint at first is light brown, but gradually deepens in intensity, until the colour may be very dark towards the end of pregnancy. The darkening of the skin round the nipple is not, however, always discernible. Even when it is, it may not necessarily mean pregnancy. The great sign is the appearance of a secretion like glycerine, even only a few drops, in the breasts.

*A dark brown areola or mark* around the nipple is one of the distinguishing signs of pregnancy—more especially of a *first* pregnancy. Women who have had large families seldom, even when they are not *enceinte*, lose this mark entirely, but when they are pregnant it is more intensely dark—the darkest brown—especially if they be brunettes.

A fourth symptom is *quickening*. This generally occurs about the completion of the *fourth* calendar month; sometimes a week or so before the end of that period; at other times a week or two later. A lady sometimes quickens as early as the *third* month, while others, although rarely, quicken as late as the *fifth*, and, *in very rare cases*, the *sixth* month. It will therefore be seen that there is an uncertainty



as to the period of quickening, although, as I before remarked, the *usual* period occurs either on, or a week or so before, the completion of the *fourth* calendar month of pregnancy.

*Quickening* is one of the most important signs of pregnancy, and one of the most valuable, and is due to the movements of the child, which are now for the first time felt.

*Quickening* is a proof that nearly half the time of pregnancy has passed. If there be a liability to miscarry, *quickening* makes matters more safe, as there is less likelihood of a miscarriage *after*, than *before it*.

A lady at this time frequently feels faint or actually faints away; she is often giddy, or sick, or nervous, and in some instances even hysterical; although, in rare cases, some women do not even know the precise time when they quicken.

The sensation of "quickening" is said by many ladies to resemble the fluttering of a bird; by others it is likened to a heaving, or beating, or rearing, or leaping sensation, accompanied sometimes with a frightened feeling. These flutterings, or heavings, or beatings, or leapings, after the first day of quickening, usually come on half or a dozen times a day, although it may happen, for days together. the patient does not feel the movement of the child at all, or if she does, but very slightly.

"Quickening" arises from the ascending of the

womb higher into the abdomen, as, from its increased size, there is not room for it below, and so it comes in contact with the abdominal walls, and the movements of the child are transmitted to them, and therefore are more easily felt. Moreover, another cause of quickening is, the child has reached a further stage of development, and has, in consequence, become stronger both in its muscular and nervous structure, so as to have strength and motion of his limbs, powerful enough to kick and plunge about the womb, and thus to give the sensation of "quickening."

The old-fashioned idea was that the child was not alive until a woman had quickened. This is a mistaken notion, as he is alive, or "quick," from the very commencement of his formation. Hence the heinous sin of a woman, in the *early* months of pregnancy, using means to promote abortion: it is as much murder as though the child were at his full time, or as though he were butchered when he was actually born. An attempt, then, to procure abortion is *a crime of the deepest dye*—viz., a heinous *murder*. It is sometimes attended moreover, with fearful consequences to the mother's own health; it may either cause her *immediate* death, or it may so grievously injure her constitution that she may never entirely recover. Our profession is a noble one, and every qualified member of it would scorn and detest the very idea either of

promoting or of procuring an abortion; but there are unqualified villians who practise the damnable art. Transportation, if not hanging, ought to be their doom. The seducers, who often assist and abet them in their nefarious practices, should share their punishment.

Dr. Taylor, on the "legal relations" of abortion, gives, in his valuable work on *Medical Jurisprudence*, the following:—"The English law relative to criminal abortion is laid down in the statute 1 Vict. c. lxxxv. sec. 6. By it, capital punishment, which formerly depended on whether the female had quickened or not, is abolished. The words of the statute are as follows:—'Whosoever, with the intent to procure the miscarriage of any woman, shall unlawfully administer to her, or cause to be taken by her, any poison or other noxious thing, or shall unlawfully use any instrument or other means whatsoever with the like intent, shall be guilty of felony, and, being convicted thereof, shall be liable, at the discretion of the Court, to be transported beyond the seas for the term of his or her natural life, or for any term not less than fifteen years, or to be imprisoned for any term not exceeding three years.' " Notice that any such person shall be "guilty of felony" even if the woman should happen not to be pregnant or if such attempts on a pregnant woman should fail to be effective. It is the "intent" to procure the miscarriage, and not only

the actual accomplishment of that design, that constitutes a crime against the law of the land, and miscarriage at the second week (actually produced or only attempted) is as much a "felony" as at the fifth month. Ladies should remember that they are asking a medical man to commit a "felony" for which he can be heavily punished, when suspecting that they are pregnant, they ask him to prescribe medicine for them which will "bring on the periods," even when they have gone only a few days over their time.

Flatulence has sometimes misled a young wife to fancy that she has quickened; but, in determining whether she be pregnant, she ought never to be satisfied with one symptom alone; if she be, she will frequently be misled. The following are a few of the symptoms that will distinguish the one from the other:—In flatulence the patient is small one hour and large the next; while in pregnancy the enlargement is persistent, and daily and gradually increases. In flatulence, on pressing the bowels firmly, a rumbling of wind may be heard, which will move about at will; while the enlargement of the womb in pregnancy is stationary.

The fifth symptom is, immediately after the quickening, *increased size and hardness of the abdomen*. An accumulation of fat covering the abdomen has sometimes led a lady to suspect that she is pregnant; but the soft and doughy feeling of the fat is very

different to the hardness, solidity, and resistance of the pressure of pregnancy.

*Increased size and hardness of the abdomen* is very characteristic of pregnancy. When a lady is not pregnant the abdomen is soft and flaccid; when she is pregnant, and after she has quickened, the abdomen, over the region of the womb, is hard and resisting. Enlargement of the abdomen sometimes occurs almost at once, and is then due to an accumulation of fat; more often it comes on about the fifth month, and is then due to the enlargement of the womb.

The sixth symptom is *pouting or protrusion of the navel*. This symptom does not occur until some time after a lady has quickened; indeed, for the first two months of pregnancy the navel is often drawn in and depressed. As the pregnancy advances, the navel gradually comes more forward. It may ultimately become smoothed out on the same level as the skin of the abdomen. Sometimes it may become so stretched as to bulge forward beyond the abdominal skin. It may then contain a coil of intestine, and is called umbilical hernia.

The seventh symptom is *irritability of the bladder*, which is sometimes one of the early signs of pregnancy, as it is, likewise, frequently one of the early symptoms of labour. The *irritability of the bladder*, in early pregnancy, is oftentimes very distressing and very painful—the patient being disturbed from her



sleep several times in the night to make water—making generally but a few drops at a time. This symptom usually leaves her as soon as she has quickened; to return again—but, in this latter instance, usually without pain—just before the commencement of labour.

In the way of relief, one of the best remedies is a small teaspoonful of sweet spirits of nitre, in a wine-glassful of water, taken at bedtime. Another is, drinking plentifully, as a beverage, of barley water with best gum arabic dissolved in it—half an ounce of gum to every pint of barley water—the gum arabic being dissolved in the barley water by putting them both in a saucepan over the fire, and stirring them until the gum be dissolved. This beverage may be sweetened according to taste, either with sugar-candy or with lump sugar. The best relief is afforded by wearing, during the day, a good obstetric belt made to fit properly; and by bandaging the abdomen at night with a flannel binder, or using a flannel or linen belt.

*Sleepiness, heartburn, increased flow of saliva, (amounting, in some cases, even to salivation), toothache. loss of appetite, longings, excitability of mind, eruptions on the skin and likes and dislikes in eating—these symptoms—the one or the other—frequently accompany pregnancy. As they may arise from other causes, they are not to be relied on further than this—that if they attend the more certain signs of pregnancy,*



such as cessation of being "regular," morning-sickness, pains and enlargement of and milk in the breasts, the gradually darkening brown areola or mark around the nipple, etc., they will then make assurance doubly sure, and a lady may know for certain that she is pregnant.\*

*Sleepiness* often accompanies pregnancy—the patient being able to sleep in season and out of season—often falling asleep while in company, so that she can scarcely keep her eyes open!

*Heartburn*.—Some pregnant ladies are much afflicted with heartburn; for affliction it assuredly is; but heartburn, as a rule, although very disagreeable, is not a serious symptom. Moreover, heartburn is very amenable to treatment, and may generally be much relieved by ammonia and soda—a prescription for which appears in these pages (see "Heartburn in Pregnancy.")

*Increased flow of saliva* is sometimes a symptom of pregnancy, amounting, in rare cases, to regular salivation—the patient being, for a time, in a pitiable condition. It lasts usually for days; but some-

\* This work is exclusively intended for the perusal of wives. I beg, however, to observe that there is one sign of pregnancy which I have not pointed out, but which to a medical man is very conclusive; I mean the sounds of the foetal heart. Indicated by the stethoscope, and which is for the first time heard somewhere about the fifth month. Moreover, there are other means besides the stethoscope known to a doctor, by which he can with certainty tell whether a woman be pregnant or otherwise, but which would be quite out of place to describe in a popular work of this kind.

times, even for weeks, and is most disagreeable, but is not at all dangerous.

*Toothache* is a frequent sign of pregnancy—pregnancy being often very destructive to the teeth. It is most important that the teeth should be kept in good condition during pregnancy. The dentist should always be consulted so that any small cavity present may be at once filled with a temporary stopping. If this be not done, a small cavity may, and probably will, rapidly become a large one, and the patient may have to suffer the tortures of toothache at the most inconvenient of times. Whenever there is the slightest degree of toothache an examination should be immediately made by a dentist, whether it be during pregnancy or after labour.

*Loss of appetite.*—Some ladies have during pregnancy—more especially during the early months—wretched appetites; they loathe their food, and dread the approach of meal-times. While others, on the contrary, eat more heartily during pregnancy than at any other period of their lives—they are absolutely ravenous, and can scarcely satisfy their hunger!

The longings of a pregnant lady are sometimes truly absurd; but, like almost everything else, “it grows upon what it is fed.” They long for sucking pig, for the cracklings of pork, for raw carrots and raw turnips, for raw meat—for any-

thing and for everything that is unwholesome, and which they would at any other time loathe and turn away from in disgust. The best plan of treatment to adopt for a pregnant lady, who has longings, is not to give way to such longings, unless indeed, the longings be of a harmless simple nature, and then they will soon pass by harmlessly.

*Excitability of mind* is very common in pregnancy, more especially if the patient be delicate; indeed, excitability is a sign of debility, and requires plenty of good nourishment, but few stimulants.

*Likes and dislikes in eating* are of frequent occurrence in pregnancy—particularly in early pregnancy, more especially if the patient have naturally a weak digestion. If her digestion be weak, she is very likely to have a disordered stomach—one following the other in regular sequence. A little appropriate medicine, from a medical man, will remedy the evil, and improve the digestion, and thus do away with likes and dislikes in eating.

*Eruptions on the skin*—principally on the face, neck and throat—are tell-tales of pregnancy.

### CLOTHING.

Some newly-married wives, to hide their pregnancy from their friends and acquaintances, screw themselves up in tight stays and in tight dresses.

Now, this is not only foolish, but it is dangerous. A wife, then, more especially during pregnancy, should, to the breasts and to the abdomen—

“Give ample room and verge enough.”

The neck swells, especially the gland called the thyroid in front of the neck. Undue enlargement of this gland constitutes goitre.

In all ages poets, by the divine afflatus gifted beyond other men with true insight into the energies of the animated world, have been struck with the transforming force of pregnancy. And so Browning, the greatest of all poets in mental analysis describes—

“The strange and passionate precipitance  
Of maiden into motherhood  
Which changes body and soul by Nature's law ;  
So when the she-dove breeds, strange yearnings come  
For the unknown shelter by undreamed-of shores ;  
And there is born a blood-pulse in her heart  
To fight if needs be, though with flap of wing.  
For the wool-flock or the fur-tuft, though a hawk  
Contest the prize.”

A lady who is pregnant ought on no account to wear tight dresses, as the child should have plenty of room. She ought to be, as *enceinte* signifies, *incincta*, or unbound. Let the clothes be adapted to the gradual development, both of the abdomen and the breasts. She must, whatever she may usually do, wear her stays loose. If there be bones in the stays, let them be removed. Tight lacing

is injurious both to the mother and to the child. Sometimes it has so pressed in the nipples as to prevent a proper development of them, so that where a lady has gone her time she has been unable to suckle her infant, the attempt often causing an abscess in the breast. These are real misfortunes, and entail great misery both on the mother and on the child, and ought to be a caution and a warning to every lady for the future.

The feet and the legs during pregnancy are very apt to swell and to be painful, and the veins of the legs to be largely distended. Garters ought not to be worn, as garters are injurious, and if the veins be very much distended it will be necessary for her to wear a properly-adjusted elastic silk stocking, made purposely to fit her foot and leg, and which a medical man will himself procure for her. It is highly necessary that a well fitting elastic stocking be worn; otherwise it will do more harm than good. The feet and legs, in such a case, should, during the day, be frequently rested on a leg-rest, or on a footstool, or on a sofa. Swelling of the feet is sometimes an indication that the kidneys are not acting satisfactorily. Such disordered function of the kidneys is most likely to occur in a *first* pregnancy, and it not only produces swelling of the feet, but also sometimes, puffiness of the eyelids and swelling of the private parts. It may also lessen the amount of water passed and change it to a dark colour. As this condition of the kidneys, if untreated, may lead

to the most serious consequences, the water should be immediately tested by a medical man if there is any suspicion of its presence—in fact it is a wise precaution for every woman who is pregnant for the first time to have her water tested regularly during the last three or four months of pregnancy.

### ABLUTION.

During pregnancy a prolonged hot bath must not be used. The temperature of the bath should be about blood-heat, i.e., about 100° Fahrenheit and the ablutions should be quickly made and the body thoroughly cleansed with soap and water, especial care being directed to the genital organs. Then with a moderately coarse towel the body should be quickly dried, and the refreshing benefit of the bath will be gained. Lying about in an excessively hot bath, though perhaps comforting at the time, will be followed by a feeling of languor and lassitude and an inability to carry out the duties and exercise which a day's work entail.

### AIR AND EXERCISE.

A young wife, in her *first* pregnancy, usually takes *too long* walks. This is a common cause of *flooding*, of *miscarriage* and of *bearing down* of the womb. As soon therefore as a lady has the *slightest suspicion* that she is *enceinte*, she must be careful in the taking of exercise.



Although *long* walks are injurious, she ought not to run into an opposite extreme. Short, gentle, and frequent walks during the whole period of pregnancy cannot be too strongly recommended. A lady who *in-enceinte* ought to live half her time in the open air. Fresh air and exercise prevent many of the unpleasant symptoms attendant on that state; they keep her in health; they tend to open her bowels; and they relieve that sensation of faintness and depression so common and distressing in *early* pregnancy.

Exercise, fresh air, and occupation are then essentially necessary in pregnancy. If they be neglected, hard and tedious labours are not unlikely to ensue. One and an important reason of the easy and quick labours and rapid "gettings about" of poor women is the abundance of exercise and of occupation which they are daily and hourly obliged to get through. A poor woman thinks but little of a confinement, while a rich one is full of anxiety about the result. Let the rich lady adopt the poor woman's industrious and abstemious habits, and labour need not then be looked forward to, as it frequently now is, either with dread or with apprehension.

All forms of violent exertion, such as lifting of heavy weights, and anything that produces overstraining, ought to be carefully avoided. Avoid toiling up hills or stairs. When down to break-

fast, down for the day if possible. In any case, as little climbing stairs or standing as possible. Running, horse-exercise, cycling, and dancing are likewise dangerous—they frequently induce a miscarriage. Motoring in a smooth-running car on good roads is unlikely to do harm to a robust woman. Motoring that entails much bumping or shaking or turning corners at a high speed is, of course, bad. It would also be imprudent for one who had previously miscarried, or who had been threatened with a miscarriage, to motor during pregnancy.

Indolence is most injurious in pregnancy. It is impossible for a pregnant lady, who is reclining all day on a sofa or an easy chair, to be strong; such a habit is most enervating. It is the custom of some ladies, as soon as they become *enceinte*, to fancy themselves confirmed invalids, and to lie down, in consequence, the greater part of every day; now this plan, instead of refreshing them, depresses them exceedingly. The only time for them to lie down is occasionally in the day when they are really tired and when they absolutely need the refreshment of rest—

“The sedentary stretch their lazy length  
When custom bids, but no refreshment find,  
For none they need.”—*Cowper*.

A lady who, during the greater part of the day, lounges about on easy chairs, and who seldom walks out, often has a much more lingering and

painful labour than one who takes moderate and regular open air exercise, and who attends to her household duties. An active life is, then, the principal reason why the wives of the poor have such quick and easy labours, and such good recoveries; why their babies are so rosy, healthy, and strong, notwithstanding the privations and hardships and poverty of the parents—

“Be not solitary, be not idle.”—*Burton.*

Bear in mind, then, that a lively, active woman generally has an easier and quicker labour, and a finer race of children, than one who is lethargic and indolent.

A lady sometimes looks upon pregnancy more as a disease than as a natural process; hence she treats herself as though she were a regular invalid, and, unfortunately, she too often makes herself really one by improper and by foolish indulgences.

#### VENTILATION—DRAINAGE.

Let a lady look well to the *ventilation* of her house; let her take care that every chimney be unstopped, and during the day-time that every window in every unoccupied room be thrown open. Where there is a skylight at the top of the house, it is well to have it made to open and to shut, so that in the day-time it may, winter and summer, be always open; and in the summer-time it may, day and night, be

left unclosed. Nothing so thoroughly ventilates and purifies a house as an open skylight.

If a lady did but know the importance—the vital importance—of ventilation, she would see that the above directions were carried out to the very letter. The cooping-up system is bad; it engenders all manner of infectious and loathsome diseases, and not only engenders them, but feeds them, and thus keeps them alive. There is nothing wonderful, in all this, if we consider, but for one moment, that the exhalations from the lungs are poisonous; that is to say, that the lungs give off carbonic acid gas (a deadly poison), which if it be not allowed to escape out of the room, must over and over again be breathed. That, if the perspiration of the body (which in twenty-four hours amounts to two or three pounds!) be not permitted to escape out of the apartment it must become fœtid—repugnant to the nose, sickening to the stomach, and injurious to the health. Oh, how often the nose is a sentinel, and warns its owner of approaching danger.

Verily the nose is a sentinel! The Almighty has sent bad smells for our benefit to warn us of danger. If it were not for an unpleasant smell we should be constantly running into destruction! How often we hear of an ignorant person using disinfectants and fumigations to deprive drains and other horrid places of their odours; as though,

if the place could be robbed of its smell, it could be robbed of its danger. Strange infatuation! No; the frequent flushings of drains, the removal of nuisances, cleanliness, a good scrubbing of soap and water, sunshine and the air and winds of heaven, are the best disinfectants in the world. A celebrated and eccentric lecturer in surgery—Abernethy—in addressing his class, made the following quaint and sensible remark:—"Fumigations, gentlemen, are of essential importance: they make so abominable a stink, that they compel you to open the windows and admit fresh air."

Not only is the nose a sentinel, but pain is a sentinel. "The sense of pain is necessary to our very existence; we should, if it were not for pain, be constantly falling into many and great and grievous dangers;" we should, if it were not for pain, be running into the fire, and be burned; we should, if it were not for pain, swallow hot fluids, and be scalded; we should, if it were not for pain, be constantly letting things "go the wrong way," and be suffocated; we should, if it were not for pain, allow foreign substances to enter the eye, and be blinded; we should if it were not for pain, be lulled to a false security, and allow disease to go on unchecked and untended, until we had permitted the time to pass by when remedies were of little or no avail. Pain is a sentinel, and guards us from danger; pain is like a true friend, who

sometimes gives a little pain to save a greater pain; pain sometimes resembles the surgeon's knife—it gives pain to cure pain. Sense of pain is a blessed provision of Nature, and is designed for the protection, preservation and prolongation of life!

Contagious diseases are bred and fed in badly-ventilated houses. Ill-ventilated houses are hot-beds of disease. Contagion is subtle, quick, invisible, and inscrutable—tremendous in its effects; it darts its poison like a rattlesnake, and instantly the body is infected, and the strong giant suddenly becomes as helpless as the feeble infant—

“Even so quickly may one catch the plague.”—*Shakespeare*.

Not only should a lady look well to the ventilation of her house, but either she or her husband ought to ascertain that the *drains* are in good and perfect order, and that no sewer or water-closet pipe communicates, in any way whatever, with the drinking water supply. If it, unfortunately, should do so, the supply is poisoned, breeding pestilence. Bad drains are fruitful sources of tonsillitis, typhoid fever, diphtheria, cholera, and a host of other infectious, and contagious, and dangerous diseases. It is an abominable practice to allow dirt to fester near human habitations, more especially as dirt when mixed with earth is really so valuable in fertilising the soil. Lord Palmerston wisely said—“dirt is only matter in the wrong place.



Sewer poison is so instantaneous in its effects, so subtle in its operation, so deadly in its consequences, so untiring in its labours—working both day and night—that it may well be said to be “the pestilence that walketh in darkness,” and “the sickness that destroyeth in the noonday.” A lady ought to look well to the purity of her *drinking water* and to ascertain that no drain enters, or percolates, or contaminates in any way whatever the water supply. If it should do so, disease, such as cholera, or diarrhœa, or dysentery, or diphtheria, or scarlet fever, or typhoid fever, will, one or the other, as a matter of course, ensue. If there be the slightest danger or risk of drain contamination, let the drain be taken up and examined *at once*, and let the defect be carefully remedied. It is well to know that water which has been boiled and kept at boiling point for ten minutes has become sterilised and is absolutely safe to drink. It is made more palatable if, after being boiled, it is passed through a filter so that it becomes aërated, or is aërated in a seltzogene or sparklet apparatus.

#### NECESSITY OF OCCASIONAL REST.

A lady who is pregnant ought to lie one or two hours every day on the sofa for half an hour at a time. This, if there be a bearing-down of the womb, or if there be a predisposition to a miscar-

riage, will be particularly necessary. I should recommend this plan to be adopted throughout the whole period of the pregnancy; in the early months to prevent a miscarriage; and, in the latter months, on account of the increased weight and size of the womb.

The modern sofas are most uncomfortable to lie upon; they are not made for comfort, but, like many other things in this world, for show: one of the good old-fashioned roomy sofas, then, should be selected for the purpose in order that the back may be properly and thoroughly rested.

There is, occasionally, during the latter months, a difficulty in lying down—the patient feeling as though, every time she makes the attempt, she should be suffocated. When such is the case, she ought to rest herself upon the sofa, and be propped up with cushions, as rest at different periods of the day is necessary and beneficial. If there be any difficulty in lying down at night, a bed-rest, well covered with pillows, will be found of great comfort.

### DIETARY.

Let me in this place urge a lady, during her pregnancy, not to touch stimulants, such as brandy or gin; they will only give false spirits, and will depress her in an increased ratio as soon as their effects have passed away. She ought to eat meat

in moderation. Rich soups and highly-seasoned stews and dishes are injurious.

A lady who is *enceinte* may depend upon it that the less stimulants she takes at these times the better it will be both for herself and for her infant; the more kind will be her labour and her "getting about," and the more vigorous and healthy will be her child.

It is a mistaken notion that she requires more nourishment during early pregnancy than at any other time. It has often been asserted that a lady who is pregnant ought to eat very heartily, as she has to provide for two lives. When it is taken into account that during pregnancy she "ceases to be unwell," and therefore that there is no drain on that score; and when it is also considered how small the ovum containing the embryo is, not being larger than a hen's egg, for the first two months or so, it will be seen how erroneous is the assertion. A wife, therefore, in early pregnancy, does not require more than at another time. Again, during pregnancy, especially in the early stage, she is more or less sick and irritable, and a superabundance of food would only add fuel to the fire, and would increase her sickness and irritability. Moreover, she frequently suffers from heartburn and from indigestion. Can anything be more absurd, when such is the case, than to overload a stomach already loaded with food

which it is not able to digest? No, let Nature in this, as in everything else, be her guide, and she will not then go far wrong. When she is further advanced in her pregnancy—that is to say, when she has quickened—her appetite generally improves and she is much better in health than she was before; indeed, after she has quickened, she is frequently in better health than she ever had been. The appetite is now increased. Nature points out that she requires more nourishment than she did at first; for this reason, the child is now rapidly growing in size, and consequently requires more support from the mother. Let the food, therefore, of a pregnant woman be now increased in quantity, but let it be both light and nourishing. Occasionally, at this time, she has taken a dislike to butcher's meat; if she has, she ought not to be forced to eat it, but should have instead poultry, game, fish, new milk, farinaceous food—such as rice, sago, batter-puddings—and, if she have a craving for it, good sound ripe fruit.

Roasted apples, ripe pears, raspberries, strawberries, grapes, tamarinds, figs, Muscatel raisins, stewed rhubarb, stewed or baked pears, stewed prunes, the insides of ripe gooseberries, and the juice of oranges, are, during pregnancy, particularly beneficial; they both quench the thirst and tend to open the bowels.

The food of a pregnant woman cannot be too

plain; highly-seasoned dishes ought, therefore, to be avoided. Although the food be plain, it must be frequently varied. She should ring the changes upon butcher's meat, poultry, game, and fish. It is a mistaken notion that people ought to eat the same food over and over again, one day as another. The stomach requires variety.

Light puddings, such as rice, or batter, or suet pudding, or fruit puddings—provided the paste be plain—may be taken with advantage—Rich pastry is objectionable.

A lady who is not full-blooded should, during the three or four latter months of her pregnancy, keep up her strength by good nourishing food; but not by stimulants—the less stimulants she takes the better, although there can be no objection to her drinking daily one or two glasses of wine.

I have known some ladies, during the few last months of their pregnancies, abstain from meat altogether, believing thereby that they would insure easier confinements and better “gettings about.” Now, this is altogether a mistake: they are more likely, from the low diet, to have more tedious and harder labours and worse “gettings about.” Not only so, but if they are kept, during the last months of their pregnancies, on too low a diet, they are likely to make wretched nurses for their children, both in the quantity and in the quality of their milk. No; let a lady who is *enceinte* adopt

the best hygienic means, which I have in these pages, endeavoured to lay down, and she will then be prepared both for her coming labour and for her subsequent suckling. As is well known, it was recently claimed that the sex of the child could be influenced by the diet of the mother, so that either a boy or a girl could be produced at will. Experience has proved this claim to be untrue.

A pregnant lady then should endeavour by every means in her power to make herself healthy; this is the best way to prepare for labour and for suckling. I am not advocating luxury, ease, and enervation—nothing of the kind, for I abhor luxurious living; but, on the contrary, I am recommending simplicity of living, occupation, fresh air, and exercise, and plain, wholesome nourishing diet; all of which may be considered as Nature's medicine—and splendid physic, too, it is!

### SLEEP.

The bedroom of a pregnant lady ought, if practicable, to be large and airy. Particular attention must be paid to the *ventilation*. The chimney should on no account be stopped. The door and the windows ought in the day-time to be thrown wide open, and the bed-clothes should be thrown back, that the air may, before the approach of night, well ventilate them, and a window should be left open, or partially open, at night.



It is a mistaken practice for a pregnant woman, or for any one else, to sleep with closely drawn curtains. Pure air and a frequent change of air are quite as necessary—if not more so—during the night as during the day; and how can it be pure, and how can it be changed, if curtains be closely drawn around the bed? Impossible. The roof of the bedstead ought not to be covered with furniture; it should be open to the ceiling, in order to prevent any obstruction to a free circulation of air. Luckily the old-fashioned bedstead is almost a thing of the past.

The bed must not be overloaded with clothes.

It is a marvel how some people, with close-drawn curtains, with four or five blankets, and with thick coverlet on bed, can sleep at all; their skins and lungs are smothered up, and are not allowed to breathe: for the skin is as much a breathing apparatus as are the lungs themselves. Oh, it is a sad mistake, and fraught with serious consequences! The only use of bed curtains is to keep out, on the side of the bed where light and draughts intrude, the light and draughty currents.

The bedroom, at night, should be dark, and as far removed from noise as possible—as noise is an enemy to sleep. The room, then, should, as the poet beautifully expresses it, be “deaf to noise,” “and blind to light.”

A lady who is pregnant is sometimes restless at

night—she feels oppressed and hot. The best remedies are—(1) Scant clothing on the bed. (2) The upper sash of the window to be left completely open during the summer months, and during the winter months to the extent of several inches—provided the room be large, the bed be neither near nor under the window, and the weather be not intensely cold. If any or all of these latter circumstances are present, then (3) the window must be closed and the door be left ajar (the landing or the skylight window at the top of the house being left open all night, and the door being secured from intrusion by means of a door-chain. (4) Attention to be paid, if the bowels be costive—but not otherwise—to a *gentle* action of the bowels by medicine. (5) An abstemious diet, avoiding stimulants of all kinds. (6) Gentle walking exercise. (7) Taking the morning bath as previously advised. (8) Fruits in the summer are in such a case very grateful and refreshing.

A pregnant woman sometimes experiences an inability to lie down, the attempt occasionally producing a feeling of suffocation and of faintness. She ought, in such circumstances, to lie on a bed-rest, which must, by means of pillows, be made comfortable.

Pains at night, during the latter end of the time, are usually frequent, so as to make an inexperienced lady fancy that her labour is commencing. Little

need be done; for, unless the pains be violent, there ought not to be any meddling with Nature. If they be violent application should be made to a medical man.

A pregnant lady should retire early to rest. She ought to be in bed every night by ten o'clock, and should make a point of being up in good time in the morning, that she may have a thorough ablution, a stroll in the garden, and an early breakfast; and that she may afterwards take a short walk either in the country or in the grounds while the air is pure and invigorating. But how often, more especially when a lady is first married, is an opposite plan adopted! The importance of bringing a healthy child into the world, if not for her own and her husband's sake, should induce a wife to attend to the above remarks.

### MEDICINE.

A young wife is usually averse to consulting a medical man concerning several *trifling* ailments, which are, nevertheless, in many cases, both annoying and distressing. I have therefore deemed it well to give a brief account of such *slight* ailments, and to prescribe a few *safe* and *simple* remedies for them. I say *safe* and *simple*, for *active* medicines require skilful handling, and therefore ought not—unless in certain emergencies—to be used except by a doctor himself. I wish it, then, to be distinctly

understood that a medical man ought to be called in, in all *serious* attacks, and also in *slight* ailments, if not quickly relieved.

A costive state of the bowels is common in pregnancy; a *mild* aperient is therefore occasionally necessary. The mildest must be selected, as a strong purgative is highly improper, and even dangerous. Calomel and all other preparations of mercury are to be especially avoided, as a mercurial medicine is apt to weaken the system, and sometimes even to produce a miscarriage.

An abstemious diet, where the bowels are costive, is more than usually desirable, for if the bowels be torpid a quantity of food will only make them more sluggish. Overloaded bowels are very much in the same predicament as an overloaded machine—they are both hampered in their action, and unable to do their work properly, and consequently become clogged. Besides, when labour comes on, a loaded state of the bowels will add much to a lady's sufferings as well as to her annoyance.

The following aperients may be used—cascara, syrup of figs, infusion of senna pods, salad oil, compound rhubarb pills, honey, stewed prunes, stewed rhubarb, Muscatel raisins, figs, grapes, roasted apples, baked pears, stewed Normandy pippins, coffee, brown bread and treacle, raw Demerara sugar (as a sweetener of the food), Scotch oatmeal with milk or with water, or with equal parts

of milk and water. Saline aperients are also useful, such as Hunyadi, Rubinat, Condal. All these act best if taken in a tumbler half full of hot water the first thing in the morning on an empty stomach.

If *salad oil* be chosen as an aperient—it being a gentle and safe one—the dose ought to be as much again as of castor oil; and the patient, during the day she takes it, should eat a fig or two, or a dozen or fifteen of stewed prunes, or of stewed French plums, as *salad oil* is much milder in its effects than castor oil. *Salad oil* is, if a patient be ill-nourished, preferable to castor oil, the former being not only an aperient but a nutrient; *salad oil* is almost as fattening as, and far more agreeable than, cod-liver oil.

There is an agreeable way of taking *salad oil*, namely, in a salad. If, therefore, it be summer-time, and a pregnant lady's bowels be costive, she should partake plentifully of a salad, with plenty of *salad oil* in it. If the patient be thin, *salad oil* is particularly indicated, as *salad oil* is not only an aperient, but a fattener and a warmer of the system. Salads, on the Continent, are always made with oil; indeed, *salad oil* enters largely into French cookery.

Where a lady cannot take oil, one or two compound rhubarb pills may be taken at bedtime; or a Seidlitz powder early in the morning, occasionally;

some find cascara satisfactory, others prefer syrup of figs or six to eight senna pods infused with hot water.

When the motions are hard, and when the bowels are easily acted upon, two, or three, or four pills made of Castile soap will frequently answer the purpose; and if they will, are far better than any ordinary aperient. The following is a good form:—

Take of—Castile Soap, five scruples ;

Oil of Caraway, six drops ;

To make twenty-four pills. Two, or three, or four, to be taken at bedtime, occasionally.

A tea-spoonful of honey, either eaten at breakfast, or dissolved in a cup of tea, will frequently comfortably and effectually open the bowels, and will supersede the necessity of taking aperient medicine.

Let me again urge the importance of a lady, during the whole period of pregnancy, being particular as to the state of her bowels, as costiveness is a fruitful cause of painful, tedious and hard labours. It is my firm conviction that if a patient who suffers from constipation were to attend more to the regularity of her bowels, tedious cases of labour would more rarely occur, more especially if the simple rules of health were adopted, such as: attention to diet—the patient partaking of a variety of food, and allowing the farinaceous, such as oatmeal, and the vegetable and fruit element



to preponderate; the drinking early every morning of a glass of hot water; the taking of exercise in the open air; attending to her household duties; avoiding excitement, late hours, and all fashionable amusements; and visiting the water-closet at one particular hour every day—directly after breakfast being the best time for doing so, and giving the bowels ample time to act.

Many a pregnant lady does not leave the house—she is a fixture. Can it, then, be wondered at that costiveness so frequently prevails? Exercise in the fresh air, and occupation, and household duties, are the best opening medicines in the world. An aperient, let it be ever so judiciously chosen, is apt, after the effect is over, to bind up the bowels, and thus increase the evil. Now, Nature's medicines—exercise in the open air, occupation, and household duties—on the contrary, not only at the time open the bowels, but keep up a proper action for the future; hence their inestimable superiority.

If the bowels are not easily regulated by the various aperients previously alluded to, an excellent remedy for the costiveness of pregnancy is an enema, either of warm water or of soap and water, which the patient, by means of a self-injecting enema-apparatus, may administer to herself. The quantity of warm water to be used is from half a pint to a pint; the time for administering it is early in the morning, twice or three times a week.

Or a glycerine enema or suppository may be employed. The advantages of enemata are, they never disorder the stomach—they do not interfere with the digestion—they do not irritate the bowels—they are given with the greatest facility by the patient herself—and they do not cause the slightest pain. If an enema be used to open the bowels, it may be well to occasionally give one of the aperients recommended above (especially an Electuary of Figs, Raisins, and Senna), in order, if there be costiveness, to ensure a thorough clearance of the *whole* of the bowels.

If the bowels should be opened once every day, it would be the height of folly for a pregnant lady to take either castor oil or any other aperient. She ought then to leave her bowels undisturbed, as the less medicine she takes the better. If the bowels be daily and properly opened, aperients of any sort whatever would be highly injurious to her. The plan in this, as in all other cases, is to leave well alone, and never to give physic for the sake of giving it.

*Muscular Pains of the Abdomen.*—The best remedy is an abdominal belt constructed for pregnancy, and adjusted with proper straps and buckles to accommodate the gradually increasing size of the womb. This plan often affords great comfort and relief.

*Diarrhæa.*—Although the bowels in pregnancy are

generally costive, they are sometimes in an opposite state, and are relaxed. Now, this relaxation is frequently owing to there having been prolonged constipation, and Nature is trying to relieve herself by purging. Such being the case, a patient ought to be careful how she interferes with the relaxation. The fact is that, in all probability, there is something in the bowels which causes irritation, and which wants to come away, and Nature is trying all she can to effect the relief. Sometimes, provided there be no unnecessary interference, she succeeds; at others, it is advisable to give a mild aperient to assist her in her efforts. For this purpose castor oil is the best.

When such is the case, a gentle aperient, as castor oil, or tincture of rhubarb, or rhubarb and magnesia, ought to be chosen. If castor oil, a tea-spoonful or a dessert-spoonful, swimming on a little new milk, will generally answer the purpose. If tincture of rhubarb, a table-spoonful in two of water. If rhubarb and magnesia be the medicine selected then a few doses of the following mixture will usually set all to rights:—

Take of—Powdered Turkey-Rhubarb, half a drachm ;  
Carbonate of Magnesia, one drachm ;  
Essence of Ginger, one drachm ;  
Compound Tincture of Cardamoms, half an ounce ;  
Peppermint Water, five ounces and a half ;

Two table-spoonful of the mixture to be taken three times a day, first shaking the bottle.

The diet should be simple, plain, and nourishing, and should consist of chicken broth, arrow-root, and of well-made and well-boiled oatmeal gruel. Butcher's meat, for a few days, should not be eaten; and stimulants of all kinds must be avoided.

If the diarrhœa be attended with pain in the bowels, a flannel bag filled with hot table salt, and then applied to the part affected, will afford great relief. A hot-water bag, too, in a case of this kind, is a great comfort.\* The patient ought, as soon as the diarrhœa has disappeared, gradually to return to her usual diet, provided it be plain, wholesome, and nourishing. She should pay particular attention to keeping her feet warm and dry; and, if she be much subject to diarrhœa, she ought to wear round her bowels, and next to her skin, a broad flannel bandage or belt. A sudden chill of the abdomen is a frequent cause of diarrhœa. If the diarrhœa is not quickly relieved a medical man should be consulted.

*"Fidgets."*—A pregnant lady sometimes suffers

\*The hot-water bag, or bottle, as it is sometimes called, is composed of vulcanised india-rubber, and is made purposely to hold very hot water. The bag ought not to be more than *half filled* with water, as it will then better adapt itself to the shape of the abdomen. The water must be hot, but not boiling hot; if it should be very hot the bag ought to be wrapped in flannel. It is a most delightful stomach warmer and comforter, and should, where there is a family, be in every house. One great advantage of it is, that in a few minutes it is ready for use.

severely from "fidgets"; it generally affects her feet and legs, especially at night, so as entirely to destroy her sleep; she cannot lie still; she every few minutes moves, tosses, and tumbles about—first on one side, then on the other. Although "fidgets" is not at all dangerous, and might seem a trifling complaint, yet, if it be trifling, it is very annoying and destructive both to peace and comfort, making the sufferer arise from her bed in the morning unrefreshed for the remainder of the day, indeed, more tired than when the night before she sought her pillow.

The *causes* of "fidgets" are an irritable condition of the nervous system, prevailing at that particular time; and want of occupation.

The *treatment* of "fidgets" consists of:—sleeping in a well-ventilated apartment, with either window or door open—if the latter, the door secured from intrusion by means of a door chain; sleeping on a horsehair mattress, taking care that the bed be not overloaded with clothes; a thorough ablution of the whole body every morning, and a good washing with tepid water of the face, neck, chest, arms, and hands every night; shunning hot and close rooms; taking plenty of out-door exercise; living on a bland, nourishing but not rich diet; avoiding *meat* at night, and substituting, in lieu thereof, either a cupful of arrow-root made with milk, or of well-boiled oatmeal gruel; eschewing stimulants of all

kinds; drinking, for breakfast and tea, tea instead of coffee; and taking a dose of the following medicine, as prescribed below, in water:—

Take of—Compound Tincture of Lavender, one drachm ;

Aromatic Spirits of Ammonia, eleven drachms ;

A tea-spoonful to be taken every night at bed-time, and repeated in the middle of the night if necessary, in a wine-glassful of water.

If a lady, during the night have “the fidgets,” she should get out of bed ; take a short walk up and down the room, being well protected by a dressing-gown ; empty her bladder ; turn her pillow, so as to have the cold side next to the head ; and then lie down again ; and the chances are that she will now fall asleep.

If during the day she have “the fidgets,” a ride in an open carriage ; or a stroll in the garden, or in the fields ; or a little housewifery, will do her good, as there is nothing like fresh air, exercise, and occupation to drive away “the fidgets.” It is generally those who “have nothing to do” who have “the fidgets” ; the poor woman who has to work for her daily bread does not know what “the fidgets” means ! Here again we see the value of occupation—of having plenty to do ! But idleness is discreditable, and deserves punishment, and it always will be punished.

*Heartburn* is a common and often a distressing symptom of pregnancy. The acid producing the



heartburn is frequently much increased by an overloaded stomach. The patient labours under the mistaken notion that, as she has two lives to sustain, she requires more food during this than at any other time; she consequently is induced to take more than her appetite demands, and more than her stomach can digest; hence heartburn, indigestion, etc., are caused.

An abstemious diet ought to be strictly observed. Great attention should be paid to the *quality* of the food. Greens, pastry, hot buttered toast, melted butter, and everything that is rich and gross, ought to be carefully avoided.

Soda-mint tabloids or either a tea-spoonful of heavy calcined magnesia, or half a tea-spoonful of carbonate of soda—the former to be preferred if there be constipation—should occasionally be taken in a wine-glassful of warm water. If these do not relieve—the above directions as to diet having been strictly attended to—the following mixture ought to be tried:—

Take of—Carbonate of Ammonia, half a drachm ;  
Bicarbonate of Soda, a drachm and a half ;  
Water, eight ounces ;

To make a mixture—Two table-spoonsful to be taken twice or three times a day, until relief be obtained.

Chalk is sometimes given in heartburn, but as it produces costiveness, it ought not in such a case to be used.

If costiveness accompany the heartburn, the

heavy calcined magnesia ought, as above recommended, to be taken in lieu of either carbonate of soda or of the above mixture: the dose being a teaspoonful mixed in a wine-glassful of water. The heavy calcined magnesia is preferable to the light carbonate of magnesia: it mixes smoother and better in the water, and is therefore more pleasant to take; moreover, it is stronger—twice as strong as the light carbonate of magnesia: it not only relieves the heartburn, but acts gently and pleasantly on the bowels.

*Water-brash.*—A patient in early pregnancy oftentimes suffers from water-brash; indeed, it sometimes accompanies heartburn and morning-sickness, and when it does, is very harassing and distressing. Water-brash consists of a constant eructation of a thin watery fluid into the mouth—sometimes in very large quantities. The fluid is generally as thin and clear as water; occasionally it is acid; at other times it is perfectly tasteless. Now, this waterbrash frequently ceases after the patient has quickened; at other times, it continues during the whole period of pregnancy, more especially if the patient be dyspeptic. The best remedy for water-brash is a Charcoal Biscuit—one should be eaten at any time the patient is suffering from flow of water. If the fluid of the water-brash be acid, then the mixture I have recommended for *Heartburn* will be found very serviceable: a dose of the mixture should be taken

three times a day, and a Charcoal Biscuit should be taken between times.

*Wind in the Stomach and Bowels* is a frequent reason why a pregnant lady cannot sleep at night. The two most frequent causes of flatulence are (1) the want of walking exercise during the day, and (2) the eating a hearty meal just before going to bed at night. The remedies are, of course, in each instance, self-evident. It is folly in either case to give physic, when avoidance of the cause is the only right and proper remedy. How much physic might be dispensed with if people would only take Nature and common sense for their guides; but no, they will rather take a pill—it is less trouble!—than walk a mile; they will prefer a hearty evening meal to sweet and refreshing sleep! What extraordinary tastes some persons have! Luxury and self-indulgence are, alas! the crying evils of the day.

*Piles* are a common attendant upon pregnancy. They are small, soft, spongy, dark-red tumours—enlarged veins, about the size of a bean or of a cherry, or sometimes as large as a walnut—and are either within or around the fundament; they are then, according to their situation, called either *internal* or *external* piles—they may be either *blind* or *bleeding*. If the latter, blood may be seen to exude from them, and blood will come away every time the patient has a stool.

When the piles are very large, they sometimes

—more especially during a motion—drag down a portion of the bowel, which adds much to the suffering. If the bowel should protrude, it ought, by means of the patient's index finger, to be immediately and carefully returned, taking care, in order that it may not scratch the bowel, that the nail be cut close and the finger greased.

Piles are very painful and exceedingly sore, and cause great annoyance, and frequently continue, notwithstanding proper and judicious treatment, during the whole period of pregnancy.

A patient is predisposed to piles from the womb pressing upon the blood-vessels of the fundament. They are excited into action by her neglecting to keep her bowels gently opened, or by diarrhœa, or from her taking too strong purgatives, especially pills containing aloes, or colocynth, or both.

If the piles be inflamed and painful, they ought, by means of a sponge, to be well fomented three times a day, and for half an hour each time, with hot camomile and poppy-head tea, and, at bedtime, a hot white-bread poultice should be applied.

Every time, after and before, the patient has a motion, she had better well anoint the piles and the fundament with hazeline ointment or with the following ointment:—

Take of—Camphor (powdered by means of a few drops of Spirits of Wine), one drachm ;

Prepared Lard, two ounces.

Mix to make an ointment.

If the piles are not relieved by the above treatment the help of a medical man must be sought.

The bowels ought to be kept gently and regularly opened, either by taking every morning one or other of the remedies mentioned in the section dealing with the regulation of the bowels during pregnancy.

The patient ought to lie down frequently in the day. Sometimes she is unable to sit on an ordinary seat: she will then derive great comfort from sitting either on an air-cushion or on a water-cushion about half filled with water, placed on the chair.

In piles, the patient ought to live on a plain, nourishing, simple diet, and should avoid all stimulants.

Piles in pregnancy are frequently troublesome, and sometimes resist all treatment until the patient be confined, when they generally get well of themselves; but still the remedies recommended above, even if they do not effect a cure, will usually afford great relief. A hazeline suppository pushed into the bowel and allowed to melt there, will often afford great relief to pain and will lessen the amount of hæmorrhage.

*Swollen legs from enlarged veins (varicose veins)*—The veins are frequently much enlarged and distended, causing the legs to be greatly swollen and very painful, preventing the patient from taking proper walking exercise. Swollen legs are owing to the pressure of the womb upon the blood-vessels above.

Women who have had large families are more liable than others to varicose veins. If a lady marry late in life, or if she be very heavy in her pregnancy—carrying the child low down—she is more likely to have distension of the veins.

The best plan will be for her to wear a crêpe bandage four inches wide which should be put on first thing in the morning, bandaging from the ankle upwards to the knee—the first turn of the bandage to go round the arch of the foot. A crêpe bandage will be found to be more comfortable and efficient than a heavy, non-porous elastic stocking.

If the varicose veins should be very painful, she had better apply to a medical man, as it may be necessary, in such a case, for the patient to lie up.

It may be well to repeat here that swelling of the legs is sometimes due to disorder of the kidneys, and the importance of having the urine tested in such a case.

*Stretching of the skin of the abdomen* is frequently, in a first pregnancy, distressing from the soreness it causes. The best remedy is to rub the abdomen, every night and inorning, with warm camphorated oil, and to wear a belt during the day and a broad flannel bandage at night, both of which should be put on moderately but comfortably tight. The belt must be secured in its situation by means of properly adjusted straps.



*If the skin of the abdomen* from the violent stretching, be *cracked*, the patient had better dress the part affected every night and morning with lanoline spread on lint, which ought to be kept in its place by means of a broad bandage, similar to the one used in confinements, and which is described in a subsequent paragraph (*Bandage after Confinement*).

*Pendulous Abdomen*.—A lady sometimes, from being at these times unusually large, suffers severely; so much so that she cannot, without experiencing great inconvenience move about. This where a patient is stout, and where she has had a large family of children, is more likely to occur, and especially if she has got up too soon after her previous confinements.

She ought in such a case to procure, from a surgical instrument maker, a belt, made purposely for a pendulous abdomen, which, without undue pressure on the abdomen, will be a support. It is a good plan to have the belt made either to lace behind or with straps and buckles, in order that it may accommodate itself to the gradually increasing size of the womb.

If she be delicate, and if she have a languid circulation, she ought, besides the elastic belt, to apply a broad flannel bandage, which should go twice round the abdomen, and be put on moderately and comfortably tight.

The patient, *before the approach of labour*, ought to take particular care to have the bowels *gently* opened, as during that time a costive state increases her discomfort and lengthens the period of her labour. I say a *gentle* action is all that is necessary: a *violent* one might do more harm than good.

*Morning-Sickness.*—It is said to be “morning,” as in these cases, unless the stomach be disordered, it seldom occurs during any other part of the day. Morning-sickness may be distinguished from the sickness of a disordered stomach by the former occurring only early in the morning, on the first sitting up in bed, the patient during the remainder of the day feeling quite free from sickness, and generally being able to eat and relish her food, as though nothing ailed her.

Morning-sickness begins *early* in the morning, with a sensation of nausea, and as soon as she rises from bed she feels sick and retches; and sometimes, but not always, vomits a little sour, watery, glairy fluid; and occasionally, if she have eaten the night previously a hearty meal, the contents of the stomach are ejected. She then feels all right again, and is generally ready for her breakfast, which she eats with her usual relish. Many ladies have better appetites during pregnancy than at any other period of their lives.

The sickness of a disordered stomach unaccompanied with pregnancy may be distinguished

from morning-sickness by the former continuing during the whole day, by the appetite remaining bad after the morning has passed, by a disagreeable taste in the mouth, and by the tongue being generally furred. Moreover, in such a case there is usually much flatulence.

If the stomach be disordered during pregnancy, there will, of course, be a complication of the symptoms, and the morning-sickness may become both day and night sickness. Proper means ought then to be employed to correct the disordered stomach, and the patient will soon have only the morning-sickness to contend against; which latter, after she has quickened, will generally leave of its own accord.

Morning-sickness is frequently a distressing, although not a dangerous complaint. It is only distressing while it lasts; for after the stomach is unloaded, the appetite generally returns, and the patient usually feels, until the next morning, quite well again, when she has to go through the same process as before. It occurs both in the early and in the latter months of pregnancy; more especially during the former, up to the period of quickening, *at which time it usually ceases*. Morning-sickness is frequently the *first* harbinger of pregnancy, and is looked upon by many ladies who have had children as a sure and certain sign. Morning-sickness does not always occur in pregnancy; some women, at such times, are neither sick nor sorry.

A good way to relieve it is by taking, *before rising in the morning* a cup of strong coffee. If this should not have the desired effect, she ought to try an effervescing draught:—

Take of—Bicarbonatè of Potash, one drachm and a half ;

Water, eight ounces ;

Two table-spoonsful of this mixture to be taken with one of lemon juice every hour, whilst effervescing, until relief be obtained.

Sometimes the patient does not obtain relief from her sickness until the whole contents of the stomach have been ejected. She had better, when such is the case drink *plentifully of warm* water, in order to encourage free vomiting. Such a plan, of course, is only advisable when the morning-sickness is *obstinate*, and when the treatment recommended above has failed to afford relief.

The morning-sickness, during the early months, is caused by sympathy between the stomach and the womb; and during the latter months by pressure of the upper part of the womb against the stomach. As we cannot remove the sympathy and the pressure, we cannot always relieve the sickness; the patient therefore, is sometimes obliged to bear with the annoyance.

It is a good thing for the patient to have her breakfast in bed and to remain in bed for an hour or so afterwards. By this plan the sickness may often be avoided.

The bowels ought to be kept gently opened, by a dose of electuary of figs, raisins, and senna, or by a Seidlitz powder or aperient mineral water, taken early in the morning, or by one or two compound rhubarb pills or a dose of cascara at bed-time, or by the following mixture:—

Take of—Carbonate of Magnesia, two drachms ;  
Sulphate of Magnesia, one ounce ;  
Peppermint Water, seven ounces ;

A wine-glassful of the mixture to be taken early in the morning occasionally, first shaking the bottle.

Great attention ought in such a case to be paid to the diet, it should be moderate in quantity and simple in quality. Rich dishes, highly-seasoned soups, and melted butter must be avoided. Hearty evening meals ought not on any account to be allowed. There is nothing better, if anything be taken at night, than a teacupful of nicely made and well-boiled oatmeal gruel, or arrowroot, or other farinaceous food. Any of the above may be made with water, or new milk, or with cream and water.

It is an old saying, and, I believe, as a rule, a true one, “that sick pregnancies are safe,” more especially if the sickness leaves, which it generally does, after quickening. The above remarks, of course, do not include obstinate, inveterate vomiting, occasionally occurring in the *latter* period of pregnancy, and which not only takes place in the morning, but during the whole of the day and of the

night, and for weeks together, sometimes bringing a patient to the brink of the grave. Such a case, fortunately, is extremely rare.

*Means to harden the Nipples.*—A mother, especially with her first child, sometimes suffers severely from sore nipples. Such suffering may frequently be prevented, if, for six weeks or two months before her confinement, she were to bathe her nipples every night and morning, in warm water to remove any secretion which may be clinging to them, and then apply Eau de Cologne or glycerine and lavender water, or with brandy and water, equal parts of each. The better plan would be to have the lotion in a small bottle ready for use, putting a little each time into a teacup, so as to have it fresh. A soft piece of fine old linen rag should be used for the purpose of bathing. All pressure ought to be taken from the nipples; if the stays, therefore, unduly press them, either let them be enlarged, or let them be entirely removed. The nipples themselves ought to be covered with soft linen rag, as the friction of a flannel vest would be apt to irritate them. Let me recommend every pregnant lady, *more especially in a first pregnancy*, to adopt one or other of the above plans to harden the nipples; much misery will be averted, as sore nipples are painful and distressing; and prevention at all times is better than cure.

The *Breasts* are, at times, during pregnancy, *much*



*swollen and very painful* ; and now and then they cause the patient great uneasiness, as she fancies that she is going to have either some dreadful tumour or a gathering of the bosom. There need, in such a case, be no apprehension. The swelling and the pain are the consequences of the pregnancy, and will in due time subside without any unpleasant result. The fact is, great changes are taking place in the breasts; they are developing themselves, and are preparing for the important functions they will have to perform the moment the labour is completed.

*Treatment.*—She cannot do better than rub them well, every night and morning, with equal parts of Eau de Cologne and olive oil, and wear a piece of new flannel over them; taking care to cover the nipples with soft linen, as the friction of the flannel might irritate them. The liniment encourages a little fluid to ooze out of the nipples, which will afford relief.

A well fitting bust bodice is sometimes an easy and efficient way of supporting the breasts.

If stays be worn, the patient should wear them loose, in order to allow the breasts room to develop themselves. The bones of the stays ought all to be removed, or troublesome consequences may ensue.

*The Bladder.*—The patient during pregnancy is liable to various affections of the bladder. There is sometimes a *sluggishness* of that organ, and she

has little or no inclination to make water. There is, at another time, a great *irritability* of the bladder, and she is constantly wanting to pass urine; while, in a third case, more especially towards the latter period of the time, she can scarcely *hold her water* at all—the slightest bodily exertion, such as walking, stooping, coughing, sneezing, etc., causing it to come away involuntarily; and even in some cases, where she is perfectly still, it dribbles away without her having any power to prevent its doing so. These symptoms are caused by pressure on the bladder by the enlarged womb, and of course disappear with the pregnancy.

*A sluggish state of the Bladder* is best remedied by gentle exercise, and by the patient attempting whether she want or not, to make water at least every four hours.

*Irritability of the Bladder.*—The patient ought, during the day, to drink freely of the following beverage:—

Take of—Gum Arabic, one ounce ;

Pearl Barley, one ounce ;

Water, one pint and a half :

Boil for a quarter of an hour, then strain, and sweeten either with sugar candy or with lump sugar.

The bowels ought to be gently opened with one or other of the aperients previously mentioned. The patient must abstain from stimulants, and should live on a mild, bland, nourishing diet.

*Where the patient cannot hold her water*, there is not

much to be done, as the pregnant womb, by pressing on the bladder, prevents much present relief. The comfort is, as soon as the labour is over, it will cure itself. She ought to tighten the lower part of the abdominal belt she is wearing, so as to better support the parts, and thus relieve the pressure on the bladder, and to lie down frequently in the day either on a horse-hair mattress or on a couch.

Should this condition occur during the third or fourth month of pregnancy, and be accompanied with pain, a medical man must be consulted as it may be due to a displacement of the pregnant womb.

*Fainting.*—A delicate woman, when she is *enceinte*, is apt either to feel faint or to actually faint away. When one considers the enormous changes that take place during pregnancy, and the great pressure there is upon the nerves and the blood-vessels, it is not at all surprising that she should faint. There is one consolation, that although fainting at such times is disagreeable, it is not at all dangerous, unless the patient be really labouring under a disease of the heart.

*Treatment.*—If the patient feels faint, she ought *immediately* to lie down flat on her back, without a pillow under her head; that is to say, her head should be on a level with her body. The stays and any tight articles of dress—if she have been foolish enough to wear either tight stays or tight

clothes—ought to be loosened; the windows should be thrown wide open; water ought to be sprinkled on her face; and sal-volatile—a teaspoonful in a wine-glassful of water—or a glass of wine, should be administered. Smelling-salts must be applied to the nostrils. The attendants—there should only be one or two present—should not crowd around her, as she ought to have plenty of room to breathe.

She must, in the intervals, live on a good, light, generous diet. She should keep early hours, and ought to sleep in a well-ventilated apartment. The following strengthening medicine will be found serviceable:—

Take of—Sulphate of Quinine, six grains ;  
Diluted Sulphuric Acid, half a drachm ;  
Syrup of Orange-peel, half an ounce ;  
Water, seven ounces and a half ;

Two table-spoonsful of the mixture to be taken three times a day.

If she be delicate, a change either to the country, or, if the railway journey be not very long, to the coast, will be desirable.

A nervous patient during this period is subject to *palpitation of the heart*. This palpitation, provided it occurs only during pregnancy, is not dangerous; it need not therefore cause alarm. It is occasioned by the pressure of the pregnant womb, which induces a temporary derangement of the heart's action. This palpitation is generally worse at night,

when the patient is lying down. When she is lying down, the midriff, in consequence of the increased size of the abdomen, is pressed upwards, and hence the heart has not its accustomed room to work in, and palpitation is in consequence the result.

The best remedies will be half a teaspoonful of compound tincture of lavender, or a teaspoonful of sal-volatile in a wine-glassful of camphor water, or a combination of lavender and of sal-volatile:—

Take of—Compound Tincture of Lavender, one drachm ;

Sal-Volatile, eleven drachms ;

Mix.—A tea-spoonful of the mixture to be taken occasionally in a wine-glassful of water.

These medicines ought to lie on a table by the bedside of the patient, in order that they may, if necessary, be administered at once. In these cases a stimulant is sometimes given, but it is a dangerous remedy to administer *every* time there is palpitation. The lavender and the sal-volatile are perfectly safe medicines, and can never do the slightest harm.

Mental emotion, fatigue, late hours, and close rooms ought to be guarded against. Gentle outdoor exercise, and cheerful but not excitable company, are desirable.

*Cramp* of the legs and of the thighs during the latter period, and especially at night, are apt to attend pregnancy, and are caused by the womb pressing upon the nerves which extend to the lower extremities. *Treatment*.—Tightly tie a handkerchief

folded like a neckerchief round the limb a little above the part affected, and let it remain on for a few minutes. Friction by means of the hand will also give relief. Cramp sometimes attacks either the bowels or the back of a pregnant woman; when such is the case, let a hot water bottle, wrapped in flannel, be applied over the part affected; and let either a stone bottle of hot water or a hot brick, which should be encased in flannel, be placed to the soles of the feet. If the cramp of the bowels, of the back, or of the thighs be very severe, the following mixture will be serviceable:—

Take of—Compound Tincture of Camphor, one ounce;  
Dill water, five ounces.

A wine-glassful of this mixture to be taken at bed-time occasionally, and to be repeated, if necessary, in four hours

“*The Whites*,” during pregnancy, especially during the latter months, and particularly if the lady have had many children, are frequently troublesome. The chief cause of the white creamy discharge which usually accompanies pregnancy is an increase in the secretion of mucus from the mouth and neck of the womb, and a similar increase in the natural secretion of the vagina. This is a natural process and cannot be averted. The patient ought to retire early to rest; she should sleep on a horse-hair mattress and in a well-ventilated apartment, and should not overload her



bed with clothes. A thick, heavy quilt at these times, and indeed at all times, is objectionable; the perspiration cannot pass readily through it as through blankets. She ought to live on plain, wholesome, nourishing food; and she must abstain from beer and wine and spirits. The bowels ought to be gently opened by means of a Seidlitz powder, which should occasionally be taken early in the morning.

The best application will be to bathe the parts with warm water, night and morning. A douche should not be used during pregnancy, unless specially ordered by a medical man, as in some cases it might produce a miscarriage.

Cleanliness, in these cases, cannot be too strongly urged.

Where a lady suffers severely from "the whites," she may go to the seaside. There is nothing in such cases that generally affords so much relief as the bracing effects of sea air.

The popular idea that "the whites" during pregnancy, or at other times, weakens a patient is not correct. Patients who are out of health from any cause often suffer from "the whites," but "the whites" do not cause the ill-health; they are more often the result of it.

*Irritation and itching of the external parts.*—This is a most troublesome affection, and may occur at any time, but more especially during the latter period of the

pregnancy; and as it is a subject that a lady is sometimes too delicate and too sensitive to consult a medical man about, I think it well to lay down a few rules for her relief. The misery it entails, if not relieved is almost past endurance.

Well, then, in the first place, let her diet be simple and nourishing ;let her avoid stimulants of all kinds. In the next place, and this is a most important item of treatment, let her use a tepid salt-and-water sitz-bath. The way to prepare the bath is to put a large handful of table salt into the sitz-bath, then to add *cold* water to the depth of three or four inches, and sufficient *hot* water to make the water *tepid* or *lukewarm*. The patient must sit in the bath; her slippered feet being, of course, out of the water, and on the ground, and either a woollen shawl or a small blanket being thrown over her shoulders—which shawl or blanket ought to be the only covering she has on the while. She should remain only for a few seconds, or while she can count, in the winter, fifty, or in the summer, a hundred, in the bath. Patients generally derive great comfort and benefit from these salt-and-water sitz-baths.

If the itching, during the day-time, continue, the following lotion ought to be used:—

Take of—Solution of Subacetate of Lead, one drachm ;  
Rectified Spirits of Wine, one drachm ;  
Distilled Water, one pint :

To make a lotion.—The parts affected to be bathed three or four times a day with the lotion. Or the parts may be bathed two or three times a day with equal parts of vinegar and of water. Or ten poppy-heads boiled in two pints of water, cooled down, make an excellent soothing lotion applied to the parts, and also injected into the vagina.

Another soothing and cooling lotion is a saturated solution of boracic acid, that is, a solution containing as much boracic acid as the water will dissolve.

Other soothing lotions are Cyllin (formerly Creolin), half a tea-spoonful to a pint of warm water, and carbolic acid one part to forty or sixty of warm water.

The external parts, and the passage to the womb (the vagina), in these cases, are not only *irritable* and *itching*, but are sometimes *hot* and *inflamed*, and *are covered either with small pimples or with a whitish exudation* of the nature of *aphtha* (thrush), somewhat similar to the thrush on the mouth of an infant; then, the addition of glycerine to the lotion is a great improvement, and usually gives much relief. Either of the following is a good lotion for the purpose:—

Take of—Biborate of Soda, eight drachms ;

Glycerine, five ounces ;

Distilled Water, ten ounces :

To make a lotion.—The part affected to be bathed every four hours with the lotion, first shaking the bottle.

Or

Take of—Solution of Subacetate of

Lead.

Rectified Spirits of Wine.

Glycerine, five ounces :

Rose Water, ten ounces and a half :

} of each, one drachm ;

To make a lotion.—To be used in the same manner as the preceding one,

## MISCARRIAGE.

*The untimely fruit of woman.*—THE PSALMS.

*A miscarrying womb and dry breasts.*—HOSEA.

*If a premature expulsion of the child occurs before the end of the seventh month, it is called either a miscarriage or an abortion; if between the seventh month and before the full period of nine months, a premature labour.*

A *premature labour*, in the graphic language of the Bible, is called “an untimely birth,” and untimely in every sense of the word it truly is! Untimely for mother; untimely for doctor; untimely for monthly nurse; untimely for all preconcerted arrangements; untimely for child, often causing him untimely death. A more expressive word for the purpose it is impossible to find.

A miscarriage is a serious calamity, and should be considered in that light; not only to the wife herself, whose constitution frequent miscarriages would seriously injure, and perhaps eventually ruin; but it would rob the *wife* of one of her greatest earthly privileges, the inestimable pleasure and delight of being a *mother*.

Now, as a miscarriage may *generally* be prevented, it behoves a wife to look well into the matter, and to study the subject thoroughly for herself. How necessary it is that the above important fact should be borne in mind! How much misery might

be averted; as, then, by avoiding the usual causes, means would be taken to ward off such an awful calamity. I am quite convinced that in the majority of cases miscarriages may be prevented.

Hence the importance of a *popular* work of this kind, to point out dangers, to give judicious advice, that a wife may read, ponder over, and “inwardly digest;” and that she may see the folly of the present practices that wives—young wives especially—usually indulge in; and thus that she may avoid the rocks they split on, which make a shipwreck of their most cherished hopes and treasures! How, unless a wife be taught, can she gain such information? That she can know it intuitively is utterly impossible! She can only know it from her doctor, and from him she does not often like to ask such questions. She must, therefore, by a popular work of this kind, be enlightened, or loss of life to her unborn babe, and broken health to herself, will, in all probability, be the penalties of her ignorance. It is utter folly to say that all such matters should be left entirely to the doctor—the mischief is usually done before he is consulted; besides, she herself is the right person to understand it, as she herself is the one to prevent it, and the one, if it be not prevented, to suffer. How many a broken constitution and an untimely end have resulted from the want of such knowledge as is contained in this book! It is per-

fectly ridiculous to assert that a doctor can, in a few minutes' consultation, thoroughly inform a pregnant female of *all* that is necessary for her to know for the prevention of a miscarriage.

A miscarriage is a serious matter; quite as serious as a confinement. Unfortunately a miscarriage is often looked upon as a very trivial affair and the consequence is that it is neglected and serious results follow.

*Causes.*—A slight cause will frequently occasion the separation of the child from the mother, and its consequent death and expulsion; hence the readiness with which a lady sometimes miscarries. The following are the most common causes of a young wife miscarrying:—Taking *long* walks; riding on horse-back, or over rough roads in a carriage or motor-car; a *long* railway journey; over-exerting herself, and sitting up late at night; too frequent sexual intercourse. Her mind, just after marriage, is oftentimes too much excited by large parties, by balls, and concerts. The following are, moreover, frequent causes of a miscarriage:—Falls; all violent emotions of the mind, passion, fright, etc.; fatigue, over-reaching; sudden shocks; taking a wrong step either in ascending or in descending stairs; falling downstairs; lifting heavy weights; violent purgatives; obstinate constipation; debility of constitution; fashionable amusements; dancing; late hours; tight lacing;—indeed, anything and



everything that injuriously affects either the mind or the body.

I have enumerated above, that taking a *long* railway journey is one cause of a miscarriage, and should be avoided if possible during pregnancy. This advice, of course, holds good with tenfold force if a lady be prone to miscarry, or to bring forth a child prematurely. A lady predisposed either to miscarry, or to bring forth prematurely, ought not *during any period of her pregnancy* to take a *long* railway or other journey, as it might be attended with disastrous consequences.

Of course it may be and often is necessary to run the risk of a journey during pregnancy, but where the necessity does not exist the journey is not justifiable.

The old maxim that, "prevention is better than cure," is well exemplified in the case of a miscarriage. Let me, then, appeal strongly to my fair reader to do all that she can, by avoiding the usual causes of a miscarriage which I have above enumerated, to prevent such a catastrophe. *A miscarriage is no trifling matter; it is one of the most grievous accidents that can occur to a wife and is truly a catastrophe.* Miscarriage involves the peeling off from the walls of the womb of the young and growing product of conception before its natural time, when it drops off like a ripe fruit.

*Threatening or warning symptoms of a Miscarriage.*

—A lady about to miscarry, sometimes for one or

two days, experiences a feeling of lassitude, of debility, of *malaise* and depression of spirits; she feels as though she were going to be taken "poorly;" she complains of weakness and uneasiness about the loins, the hips, the thighs, and the lower part of the abdomen. This is an important stage of the case, and one in which a judicious medical man may, almost to a certainty, be able to stave off a miscarriage.

*More serious, but still only threatening symptoms of a Miscarriage.*—If the above symptoms be allowed to proceed, unchecked and untended, she will, after a day or two, have a slight show of blood; this show may soon increase to a flooding, which will shortly become clotted. Then, perhaps, she begins for the first time to dread a miscarriage! There may at this time be but little pain, and the miscarriage *might* with judicious treatment, be even now warded off. At all events, if the miscarriage cannot be prevented, the ill effects to her constitution may, with care, be palliated, and means used to prevent a future miscarriage.

*Decided symptoms of a Miscarriage.*—If the miscarriage be still proceeding, a new train of symptoms develops itself; pains begin to come on, at first slight, irregular, and of a "grinding" nature, but which soon become more severe, regular, and "bearing down." Indeed, the case is now a labour in

miniature ; it becomes *le commencement de la fin* ; the patient is almost sure to miscarry, as the child is now probably separated from its connection with the mother.

There are two Stages of Miscarriage—(1) *The separation* of the ovum from the womb; and (2) *The expulsion* of the ovum from the womb: the former, from the rupture of vessels, is necessarily attended with more or less of flooding; the latter, in addition to the flooding, from the contraction of the womb, with more or less of pain. Now, if there be separation, there must follow expulsion. Nature is doing all she can to get rid of the separated ovum, which has become a foreign body; and if there be expulsion, there must of necessity, be pain, as contraction of the womb invariably causes pain. Hence, there is, *in every miscarriage*, except at a very early stage, more or less of flooding and of pain; indeed, you cannot have a miscarriage with out both the one and the other.

A sudden freedom, in a miscarriage, from flooding and from pain, often tells of the escape of the ovum from the womb. Although the ovum may still be lodging in the vagina—the passage from the womb—from thence it will readily and speedily, of its own accord, come away; therefore, on that head, there need be no apprehension.

The most usual time for a lady to miscarry is from the eighth to the twelfth week. It is not,

of course, confined to this period, as during the whole time of pregnancy there is a chance of a premature expulsion of the contents of the womb. A miscarriage *before* the fourth month is *at the time* attended with little danger; although, if neglected, it may for *ever* injure the constitution, or even destroy life.

There is, then, in every miscarriage, more or less of *Flooding* which is *the* most important symptom. *After* the fourth month it is accompanied with more risk, as the further a lady is advanced in her pregnancy, the greater is her danger of *increased* flooding; notwithstanding, under judicious treatment, there is every chance of her doing well. A medical man ought to be sent for in such a case always. There is much more care required in a miscarriage than in an ordinary labour.

*If bearing-down, expulsive Pains*—similar to labour pains—should accompany the flooding; if the flooding increase, and if large clots come away; if the breasts become smaller and softer; and if the milk having previously been a *little* in the bosom, suddenly dry up; if there be coldness and heaviness, and diminution in the size of the abdomen; if the motion of the child (the patient having quickened) cannot be felt; and if there be an unpleasant discharge from the vagina, she may suspect that the child is dead, and that the miscarriage *must* proceed, it being only a question of time. If the

patient thinks she has mis-carried successfully, but the discharge of blood goes on for over a week, or is too free in character, or if the discharge becomes offensive, it is probable that the whole of the ovum has not come away, then, if she has not already done so, she must summon medical help. A miscarriage sometimes begins and ends in a few days—five or six; it at other times continues a fortnight, and even in some cases three weeks.

*Treatment.*—If the patient have the slightest “show,” she ought immediately to confine herself either to a sofa, or she should keep in bed. A soft feather bed must be avoided. There is nothing better for her to sleep on than a horse-hair mattress. She either ought to lie flat upon her back, or should lie upon her side, as it is quite absurd for her merely to rest her legs and feet, as it is the back and the abdomen, not the feet and the legs, which require rest.

Sexual intercourse should, in such a case, be carefully avoided. This is most important advice, for if it be not followed, the threatened miscarriage will be almost sure to be *un fait accompli*.

Let her put herself on low diet, such as on arrowroot, tapioca, sago, gruel, chicken-broth, tea, toast-and-water, and lemonade; and whatever she does drink, ought, during the time of the miscarriage, not to be too hot or too cold. Grapes at these times are cooling and refreshing.

The temperature of the bedroom should be kept cool; and, if it be summer, the window ought to be kept open; aperient medicines must be avoided.

Let me strongly urge upon the patient the vast importance of preserving *any* and every substance that may come away, in order that it may be carefully examined by the medical man. It is utterly impossible for a doctor to declare positively that a lady has really miscarried, and that all has properly come away, if he have not the opportunity of examining the substances for himself. How often has a lady declared to her medical man that she has miscarried, when she has only parted with clots of blood! Clots sometimes put on strange appearances and require a practised and professional eye to decide at all times upon what they really are.

The same care is required *after a miscarriage* as after a labour; indeed, a patient requires to be treated much in the same manner—that is to say, she ought to keep her bed, and should live upon the diet I have recommended after a confinement, avoiding for the first few days stimulants of all kinds. Many women date their ill state of health to a *neglected* miscarriage; it therefore behoves a lady to guard against such a misfortune.

A patient prone to miscarry ought, *before* she become pregnant again, to use every means to brace



and strengthen her system. The best plan that she can adopt will be TO LEAVE HER HUSBAND FOR SEVERAL MONTHS, and go to some healthy spot; neither to a fashionable watering-place, nor to a friend's house where much company is kept, but to some quiet country place, if to a healthy farmhouse so much the better.

Early hours are quite indispensable. She ought to lie on a horse-hair mattress. She must sleep in a well-ventilated apartment. Her diet should be light and nourishing. *Gentle* exercise ought to be taken, which should alternate with frequent rest.

A lady who is prone to miscarry, *as soon as she is pregnant*, must lie down a great part of every day, she must keep her mind calm and unruffled; she must live on a plain diet; she must avoid all stimulants; *she must avoid sexual intercourse*, and she should retire early to rest. She ought as much as possible to abstain from taking opening medicine; and if she be actually obliged to take an aperient—for the bowels must not be allowed to be constipated—she should select the mildest (such as, castor oil, or cascara, or syrup of senna), and even of these she ought not to take a larger dose than is absolutely necessary, as a *free* action of the bowels is a frequent cause of a miscarriage.

Gentle walking exercise daily is desirable: *long* walks and horse-exercise must be sedulously

avoided. A trip to the coast, provided the railway journey be not very long, would be likely to prevent a miscarriage. I would not, on any account, recommend such a patient either to bathe in, or to sail on, the water, as the shock of the former would be too great, and the motion of the vessel and the sea-sickness would be likely to bring on what we were anxious to avoid.

As the *usual* period for miscarrying approaches (for it frequently comes on at one particular time), let the patient be more than usually careful; let her lie down the greater part of the day; let her mind be kept calm and unruffled; let all fashionable society and every exciting amusement be eschewed; let both the sitting and the sleeping apartments be kept cool and well ventilated; let the bowels (if they be costive) be opened by an enema of warm water; let the diet be simple and yet be nourishing; let all stimulants, such as beer, wine, and spirits, be at this time avoided; and if there be the *slightest* symptoms of an approaching miscarriage, such as pains in the loins, in the hips, or in the lower part of the abdomen, or if there be the slightest show of blood, let a medical man be *instantly* sent for, as he may, at an early period, be able to ward off the threatened mishap.

It is a wise thing for a woman who is prone to miscarry to place herself in the hands of a medical

man who, by means of drugs, may be able to ward off a miscarriage if she should become pregnant.

### FALSE LABOUR PAINS.

A lady, especially in her first pregnancy, is sometimes troubled with *spurious labour pains*; these pains usually come on at night, and are frequently owing to a disordered stomach. They affect the abdomen, the back, and the loins; and occasionally they extend down the hips and the thighs. They attack first one place and then another; they come on at irregular intervals; at one time they are violent, at another they are feeble. The pains, instead of being *grinding or bearing down*, are more of a colicky nature.

Now, as these false pains more frequently occur in a *first* pregnancy, and as they are often more violent two or three weeks before the completion of the full time, and as they usually come on either at night, or in the night, it behoves both the patient and the monthly nurse to be cognizant of the fact, in order that they may not make a false alarm, and summon the doctor before he be really wanted, and when he cannot be of the slightest benefit to the patient.

It is sometimes stated that a woman has been in labour two or three weeks before the child was

born! Such is not the fact. The case in question is one probably of *false* pains ending in *true* pains.

*How, then, is the patient to know that the pains are false and not true labour pains?* False labour pains come on three or four weeks *before* the full time; false pains are unattended with "show"; false pains are generally migratory—changing from place to place—first attacking the loins, then the hips, then the lower portions, and even other portions of the abdomen—first one part, then another; true pains generally begin in the back: false pains commence as spasmodic pains; true pains as "grinding" pains: false pains come on at uncertain periods, at one time a quarter of an hour elapsing, at others, an hour or two hours between each pain—at one time the pain is sharp, at another trifling; true pains come on with tolerable regularity, and gradually increase in severity, and the intervals of freedom from pain become less and less.

But remember—the most valuable distinguishing symptom is the *absence* of "show" in false labour pains, and the *presence* of "show" in true labour pains. It might be said that "show" does not always usher in the commencement of labour. Granted; but such cases are unusual, and may be considered as the exception and not the rule.

*Treatment.*—A dose of castor oil is generally all that is necessary; but if the pains still continue, the patient ought to be abstemious, abstaining for

a day or two from beer and wine, and rubbing the abdomen every night at bed-time with camphorated oil previously warmed. Hot salt, in a flannel bag, or a vulcanized indiarubber hot-water bag, applied every night at bed-time to the abdomen, frequently affords great relief. If the pains be not readily relieved she ought to send for a medical man, as a little appropriate medicine will probably soon have the desired effect.

These *false* labour pains may go on either for days, or even for weeks, and at length may at full time, terminate in *real* labour pains—thus causing a patient sometimes to suppose and to assert that she has been in labour for weeks, while she has, in reality, only been in *real* labour the usual length of time.

#### PERIOD OF GESTATION—"THE COUNT."

The period of gestation is usually two hundred and eighty days—forty weeks—ten lunar or nine calendar months and a few days.

"The most convenient practical rule for calculating the date of delivery is based upon the fact that 278 days is the average time from the termination of the last menstrual period, taking the mean of the observations of different authors. Hence we get the following table for calculating the date of delivery. Average duration 278 days.

|      |            |  |
|------|------------|--|
| From | Jan. 1 to  | Oct. 1 = 273 (274) days, add 5 (4) days. |
| "    | Feb. 1 "   | Nov. 1 = 273 (274) " " 5 (4) "           |
| "    | March 1 "  | Dec. 1 = 275 " " 3 "                     |
| "    | April 1 "  | Jan. 1 = 275 " " 3 "                     |
| "    | May 1 "    | Feb. 1 = 276 " " 2 "                     |
| "    | June 1 "   | March 1 = 273 (274) " " 5 (4) "          |
| "    | July 1 "   | April 1 = 274 (275) " " 4 (3) "          |
| "    | August 1 " | May 1 = 273 (274) " " 5 (4) "            |
| "    | Sept. 1 "  | June 1 = 273 (274) " " 5 (4) "           |
| "    | Oct. 1 "   | July 1 = 273 (274) " " 5 (4) "           |
| "    | Nov. 1 "   | August 1 = 273 (274) " " 5 (4) "         |
| "    | Dec. 1 "   | Sept. 1 = 274 (275) " " 4 (3) "          |

In the above table the figures in brackets are to be used in leap year in place of the others. The mode of using it may be explained by examples. Suppose the last menstrual period ended on January 10th, then October 10th will be 273 days (or in leap year 274 days); add 5 days (or in leap year 4 days) to make up the average interval of 278 days; this will give October 15th as the most probable date for delivery, which is likely to take place within about a week on one side or the other of that date. Again, suppose the last menstrual period ended on March 29th, then December 29th will be 275 days: add 3 days to make up the average interval of 278 days, this will give January 1st as the most probable date for delivery. The following rule, which may be easily remembered, will give the same results as the above table within one day, which is of little consequence, where exact determination is impossible. Take the date of the



end of last menstruation; from this reckon nine calendar months forward, or what is equivalent to the same thing, three months back: if the end of February is included in the nine months add 5 days (in leap year 4 days), if not, add 3 days. (Thus, suppose February 10th the last day of menstruation; reckon nine months forward to November 10th, and add 5 days, this will give November 15th as the most probable date of delivery." —Galabin.

I may, in passing, just point out the great importance of a wife making, every time, a note of the *last* day of her "periods;" the doing so would save her a great deal of inconvenience, uncertainty, and anxiety.

Although it is said to be possible for a woman to carry her babe forty-four weeks; that is to say, four weeks past the allotted time of forty weeks; it is also possible for a lady to carry her child *only* twenty-eight weeks, and yet to have a living infant, and an infant to live; I myself have had such a case.\* I had another case, similar to the one recorded by Shakespeare where the child was born alive "full fourteen weeks before the course of time," where the child was carried in the mother's womb only twenty-six weeks. The child in question lived for six weeks, and then died. It

\*The little girl in question, in her eighth year, was brought to my rooms. She was, for her age, of the average size, and a well-grown, handsome, healthy child,

might be asked why quote Shakespeare on such a subject? I reply—Shakespeare was a true philosopher, and a shrewd observer of Nature and of Nature's laws. Shakespeare's statement runs thus—

“He came into the world  
Full fourteen weeks before the course of time.”

### BEING OUT IN THE RECKONING.

A lady sometimes, by becoming pregnant whilst she is suckling, is put out of her reckoning; not being unwell at such a time she consequently does not know how to “count.” She ought, in a case of this kind, to reckon from the time that she “*quickens*.” That is to say, she must then consider herself nearly half gone in her pregnancy, and to be within a fortnight of half her time; or, to speak more accurately, as soon as she quickened, we have reason to believe that she has gone about one hundred and twenty-six days: she has therefore about one hundred and fifty-four more days to complete the period of her pregnancy. Suppose, for instance, that she first quickened on May the 17th, she may expect to be confined somewhere near October the 23rd. She must bear in mind, however, that she can never make so correct a “count” from quickening (quickening taking place at such various periods) as from the last day of her “periods.”

A lady is occasionally thrown out of her reckoning by the appearance, the first month after she is *enceinte*, of a little "show." This discharge ought not to be reckoned in the "count," but the "period" before must be the guide, and the plan should be adopted as previously recommended.

### "WILL THE BABE BE A BOY OR A GIRL."

It has frequently been asked, "Can a medical man tell, before the child is born, whether it will be a boy or a girl?"

One author says: "There is some fair evidence that the sex of the child, may be diagnosed by the rapidity of the pulse. The result of observation has shown that the pulse of the female is quicker than that of the male, the ratio being as 140 to 130 per minute. This may probably be due to the fact that male children are generally larger than female." The most recent observations, however, do not support this statement. Dr. Leicester (Journal of Obstetrics and Gynæcology of the British Empire, July, 1907) writes as follows, after observing 550 cases:—"The conclusions then would seem to be: (1) that sex has practically no effect on the frequency of the foetal heart, (2) that it is quite impossible in any given case to form even a rough judgment as to sex from the rate of the foetal heart beats, and (3) that weight does seem to exercise, as a general rule, a distinct influence,

since the slower the rhythm of the foetal heart the bigger the child is likely to be. To this last, however, it must be admitted there are numerous exceptions."

Some wiseacres of nurses profess themselves to be very clever in foretelling whether it will be a boy or girl some months before the babe is born. They base their prognostications on some such grounds as these, namely:—On the way a lady carries her child, whether she carry her burden high or low; whether she be large or small; whether she be larger on the right side than on the left side of the abdomen, or *vice versa*; whether she be pale and sickly countenanced, or of a good colour and healthy-looking; whether she have been troubled much with heartburn; whether she be having a sick pregnancy; and during the childbirth, whether she be having a back or an abdominal labour: whether the confinement is progressing quickly or tediously. Now, I need scarcely say that all these prognostications are utter guesswork—the coinage of a distempered brain; but as the number of boys and of girls born in England are pretty equal, they are as likely to be right as wrong! If they should happen to be right, they do not forget to tell of it; but if wrong, they allow their prognostications to die in oblivion! If a little more common sense were, at these times, observed, patients would not be likely to be gulled by such

folly, nor to be carried away by "old wives' cunningly-devised fables." As a sample of such fictions, the following choice morsel, from a book published in London in 1604, may be quoted: "Item, if it be a male, then shall the woman with child be well-coloured and light in going, her belly round, bigger towards the right side than the left (for commonly the man child lyeth in the right side, the woman in the left side), and in the time of her bearing she shall better digest and like her meat."—*The Birthe of Mankind, otherwise named the Woman's Booke*.

There are, in England, more boys than girls born—that is to say, for every 100 girls there are 105 boys. It is a curious fact—proving how definite the laws of Nature are—how closely the different censuses proclaim and verify this statement:—"For generations together it had been debated whether the birth of boys or girls were the more numerous, and the dispute, conducted on metaphysical or physiological probabilities, seemed as if it would never have an end. By the statistics of one census after another we have learned the proportions exactly, and the result is remarkable, as answering closely to the exigencies of life. The proportions of boys to girls is 105 to 100, but the greater dangers to which the male sex is exposed increase its share of mortality, so that as the years of any particular generation go on the num-

bers are first equalized, and in the end turned the other way. More men than women, in short, are required, and more boys are born than girls."—*The Times*.

### THE MONTHLY NURSE.

It is an important, a most important consideration, to choose a nurse rightly and well: the well-doing of both mother and babe often depends upon a right selection.

A good nurse, to be such, must have first been taught how to nurse. Unless she has had a regular training how can she be proficient? You may as well expect a lady, who has never learned to play the piano, to sit down and "discourse sweet music." One is quite as absurd as the other.

A monthly nurse ought to be of a sensible age. If she be young, she is apt to be thoughtless and giggling; if she be old, she may be deaf and stupid, and may think too much of her trouble. She must have calmness and self-possession. She must be gentle, kind, good-tempered, and obliging, but firm withal, and she should have a cheerful countenance. Some seem by nature to have a vocation for nursing; others not. Again, nursing has its separate branches; some have the light step, the pleasant voice, the cheering smile, the dexterous hand, the gentle touch; others are gifted in cookery for the sick. The former good qualities are essential to



a monthly nurse, and if she can combine the latter—that is to say, “if she is gifted in cookery for the sick”—she will, as a monthly nurse, be invaluable. Unless a woman have the gift of nursing she will never make a nurse. Dr. Thynne held that sick nurses, like poets, were born, not made.

Some monthly nurses are in the habit of concocting hurtful compounds, and of giving them at all hours of the day and night to their unfortunate patients, regardless of their appetites, their feelings, and wishes; they sometimes even rouse them from their slumbers to give them trashy messes. Now, all this is foolishness in the extreme, and tells us plainly that such persons are utterly ignorant, and quite unfitted for the duties of monthly nurses. The stomach, in the night season, requires rest as much as, or more than, any other part of the body, and will not then bear the disturbance of food. Besides, sleep in the night ought to be far more nourishing and strengthening than any food whatever. A monthly nurse requires in this, as in everything else, common sense to guide her, and with that she cannot go far wrong. She will then see the folly of uselessly disturbing her patient from her sleep to give her food—undisturbed sleep being far more important to the reparation and restoration of health than aught else, and everything else, besides.

She ought not to be a tattler, or a tale-bearer, or a "croaker," or a "potterer." A tattler is an abomination: a clacking tongue is most wearisome and injurious to the patient. A tale-bearer is to be especially avoided; if she tell tales of her former ladies, my fair reader may depend upon it that her turn will come.\* There is an old and a true saying, that a monthly nurse ought never, when she leaves her last situation, "to leave the door open!" That is to say, she ought never to babble about the secrets of the family she has nursed—they should be as inviolate to her as are the secrets entrusted to a doctor by his patient, or to a lawyer by his client. Have nothing, then, to do with a *gossip* of a nurse; one who knows everything of everybody—more than they know of themselves; she is a most dangerous person to have about you. Shenstone paints a capital picture of a tattling, scandal-mongering, gossiping nurse—

"See now! she's bursting with a vague report,  
 Made by the washerwoman or old nurse,  
 Time out of mind the village chronicle:  
 And with this news she gads from house to house,  
 Racking her brains to coin some wonderful  
 Astounding story out of nothing, and thus  
 To sow the seeds of discord and of strife,  
 To soil the snow-white robe of innocence,  
 To blacken worth and virtue, and to set  
 The neighbourhood together by the ears."

\* "He that goeth about as a tale-bearer revealeth secrets."

But of all nurses to be shunned, as the plague, is the "croaker," one that discourses of the dismal and of the dreadful cases that have occurred in her experience, of many of which, in all probability, she was herself the cause. She is a very upas tree in a house. A "potterer" should be banished from the lying-in room: she is a perpetual worry—a perpetual blister! She is a nurse without method, without system, and without smartness.

Some monthly nurses have a knack of setting the servants at loggerheads, and of poisoning the minds of their mistresses against them. They are regular mischief-makers, and frequently cause old and faithful domestics to leave their situations. It will be seen, therefore, that it is a momentous undertaking to choose a monthly nurse rightly and well.

The class of nurses is, fortunately for ladies, wonderfully improved, and the race of Sairey Gamp and Betsy Prig is nearly at an end. Drunkenness among midwives and monthly nurses is now the exception, and not the rule; they were, in olden times, a sadly drunken lot—they imbibed largely of aqua-vitæ (brandy): Shakespeare, in one of his plays, notices it thus—

"Does it work upon him  
Like aqua-vitæ with a midwife?"

There was formerly a prejudice against unmarried monthly nurses. Fortunately, this has, to a very

large extent, died out, for experience has shown that, as a matter of fact, single women make just as good monthly nurses as women who have themselves borne children.

She must be sober, temperate, and healthy, and free from deafness and from any defect of vision. She should have a gentle manner, but yet be neither melancholy nor hippish. She ought to have "the softest step and gentlest tone;" a heavy tread and harsh loud voice are, especially in a lying-in room, most discordant and quite out of place. Some nurses have a voice like a railway whistle, shrill and piercing; others have voices like a cart-wheel requiring greasing, and almost set one's teeth on edge! She ought to be fond of children, and must neither mind her trouble nor being disturbed at night. She should be a light sleeper. A heavy sleeper—a nurse that snores in her sleep—is very objectionable; she often keeps the patient—more especially if she be easily disturbed—awake: and sleep is to a lying-in woman priceless—

"The nurse sleeps sweetly, hired to watch the sick,  
Whom snoring, she disturbs."—*Cowper*.

"Scrupulous attention to cleanliness, freshness, and neatness" in her own person, and towards the lady and the infant, are most important requisites.

In choosing a monthly nurse, select one who has a bright sunshiny countenance; have nothing to do with a crab-vinegar-faced individual, more

especially if she has a red spot on a wrong place of her face, namely, on the tip of her nose, instead of on her cheeks: such a one is, in all probability, not only of a cross-grained temper, but she is one that, most likely, drinks something stronger and more spirituous than water, and more potent and heady than—

“The cups  
That cheer but not inebriate.”—*Cowper*.

A fine-lady nurse that requires to be constantly waited upon by a servant is not one that I would recommend. A nurse should be willing to wait upon herself, upon her mistress, and upon the baby, with alacrity, with cheerfulness, and without assistance, or she is not suitable for her situation.

As the nurse, if she does her duty, devotes her time, her talent, and her best energies to the lady and to the infant, a mistress ought to be most liberal in the payment of a monthly nurse. A good one is cheap at almost any price; while a bad one, though she come for nothing, is dear indeed. A cheap nurse is frequently the ruin of the patient's and of the baby's health, and of the peace of a household.

Ladies should recollect that the duties of a monthly nurse are exceedingly arduous and trying, particularly if the baby be troublesome at nights. Often the nurse gets hardly a moment's rest day or night for several consecutive days,

yet some ladies expect her, even in these circumstances, to be always at her brightest and best. Monthly nurses are, after all, human beings, and need rest, sleep, fresh air and exercise quite as much as other people, and if a lady wishes to get the best possible work out of her nurse, she must have consideration for her, and see that she is not made ill by sleepless nights or want of fresh air or exercise.

The monthly nurse ought to be engaged *early* in the pregnancy, as a *good* nurse is caught up soon, and is full of engagements. This is most important advice. A lady has frequently to put up with an indifferent nurse from neglecting to engage one betimes. The medical man at the eleventh hour is frequently besought to perform an impossibility, to select a *good* nurse, which he could readily have done if time had been given to him to make the selection. Some of the best nurses are engaged by patients as soon as they have gone a few days over the time that they expected their monthly period, in order to make sure of having their favourite nurses. They are quite right; a good nurse is quite of as much importance to their well-doing as a good doctor. Indeed, a *bad* nurse oftentimes makes a *good* doctor's efforts perfectly nugatory.

It is always desirable, whenever, it be possible, that the doctor in attendance should himself select



the monthly nurse, as she will then be used to his ways, and he will know her antecedents—whether she be sober, temperate, and kind, and understands her business, and whether she be in the habit of attending and of following out his directions, for frequently a nurse is self-opinionated, and fancies that she knows far better than the medical man. Such a nurse is to be scrupulously avoided. There cannot be two masters in a lying-in room; if there be, the unfortunate patient will inevitably be the sufferer. A doctor's directions *must* be carried out to the very letter. It rests with the patient to select a judicious medical man, who, although he will be obeyed, will be kind and considerate to the nurse. Ladies are too much in the habit of getting their nurses through their friends and not on the recommendation of their medical attendants. This is a most unfortunate custom; a very pleasant woman may be a very inefficient nurse. A nurse who is ignorant or careless about the use of disinfectants is a positive danger to both mother and child. How many cases of fatal blood-poisoning, or of inflammation of the womb, or the parts surrounding it, of abscess of the breast, or of inflammation of the baby's eyes or navel, have been directly due to kind but ignorant or careless nurses? We should probably be astounded if we could only know. Then a nurse should know how to control hæmorrhage if it occur,

as it sometimes does, in the absence of the medical attendant. In these circumstances, we have known a most amiable nurse allow a poor lady nearly to bleed to death without making the slightest effort to arrest the hæmorrhage. Again, I repeat, how can a lady or her friends possibly know whether a monthly nurse is efficient in these all-important matters?

A monthly nurse ought to be in a house for a week or ten days before the commencement of the labour, in order that there may be neither bustle nor excitement, and no hurrying to and fro at the last moment to find her; and that she may have everything prepared, and the linen well aired for the coming event.

She must never be allowed, unless ordered by the medical man, to give either the patient or the babe a particle of medicine. A quacking monthly nurse is a *dangerous person*. An infant who is always being drugged by a nurse is sure to be puny and ailing.

A properly trained monthly nurse understands the manner of putting on and of tightening the binder after a confinement: the latter she must do every night and morning, and at other times if necessary. The binder is useful for two reasons, and for two reasons only. First, it gives comfort; and, secondly, it prevents the loose abdominal walls from being stretched by wind in the bowels, and so tends to preserve the figure. Some high

authorities doubt whether the binder really does help to preserve the figure.

A monthly nurse who understands her business will always have the lying-in room tidy, cheerful, and well ventilated. She will not allow dirty linen to accumulate in the drawers, in corners, and under the bed; nor will she allow any chamber utensil to remain for one moment in the room after it has been used. If it be winter, she will take care that the fire in the grate never goes out, and that it is not very large, and that the room is kept as nearly as possible at one temperature—namely, at 60 deg. Fahrenheit. She will use her authority as a nurse, and keep the family from frequently running into the room, and from exciting and disturbing her patient; and she will make a point of taking charge of the babe, and of keeping him quiet while the mother, during the day, is having her needful sleep.

A good monthly nurse fully comprehends and thoroughly appreciates the importance of bathing the external parts concerned in parturition every night and morning, and sometimes even oftener, for at least two or three weeks after childbirth. And, if the medical man deem it necessary, she ought to understand the proper use of a vaginal douche. If the nurse be self-opinionated, and tries to persuade her patient not to have proper ablution—that such ablution will give cold—she is both

ignorant and prejudiced, and quite unfitted for a monthly nurse; and my advice is, that a lady should on no account engage such a person a *second* time.

Before concluding a list of some of the duties of a monthly nurse, there are six more items of advice I wish to give both to a wife and to a monthly nurse herself, which are these:—(1) Never to allow a nurse, until she be ordered by the doctor, to give any stimulant whatever to the patient. (2) I should recommend every monthly nurse to carry about with her a douche apparatus that can be boiled, for the purpose of destroying any disease-producing germs that may be in or on any part of it. Boiling is by far the most certain way of destroying germs, and should be employed in preference to the use of chemical disinfectants whenever practicable. She will thus be armed at all points, and will be ready for any emergency. It is, however, of vital importance that the apparatus should be kept scrupulously clean. It should be thoroughly boiled for fifteen minutes before it is used. (3) I should advise a nurse never to quack either the mother or the babe. A quacking nurse is a *dangerous* individual. The only person that should prescribe for either mother or babe is the medical man himself. A good nurse would never dare to do so, or to anticipate a doctor's treatment. She should remember that he

is the one to give orders, as he, in the lying-in room, is the commander-in-chief, and *must* be obeyed.

(4) A monthly nurse ought to make a point of never revealing the private concerns of her former patients. It would be a great breach of confidence for her to do so. (5) I should advise a monthly nurse, if her lying-in patient's head should ache and she cannot sleep, and it should be in the winter-time, to feed the bedroom fire with her hands covered with gloves, or to have the coals put into paper bags. The clatter of fire-irons is often an effectual method of banishing sleep altogether, and of increasing a headache. This advice may appear trivial, but it is really important. I have known patients disturbed out of a beautiful sleep by the feeding of the fire, and it is therefore well to guard against such a contingency—sleep after labour being most soothing, refreshing, and strengthening to the patient. Sleep, although easily scared and put to flight, is sometimes difficult to woo and to win. (6) I should recommend every monthly nurse, while waiting upon her patient, to wear either felt slippers or rubber soled slippers, as creaking shoes are very irritating to a patient. While speaking on the duties of a monthly nurse, there is one reprehensible practice of some few of them I wish to denounce, which is this:—A nurse declaring at each pain, when it will probably be two or three hours before the labour is over,



that two for three pains will be all that are needed! Now, this is folly, it is most disheartening, and makes the patient impatient, and to believe in bitterness of spirit that "all men," and women, too, "are liars." A nurse should take her cue from the doctor, and if he should happen to be a sensible man, he will tell his patient the truth, and express an opinion how long it will be before she is likely to be delivered. Truth in this, as in everything else, is the safest and the best policy.

A lady may, perhaps, say, "You want a nurse to be perfection?" Well, I do: a nurse ought to be as near perfection as poor human nature will allow. None but good women and true should enter the ranks of nurses; for their responsibility is great, and their power of doing good or evil is enormous. Hence *good* nurses are prizes, and should be paid most liberally.

The selection of a nurse is, for the well-being both of mother and of babe, quite as important as is the choice of a doctor. Mother and babe are thoroughly dependent upon her for the airing of clothes, for due but careful ablution, and for other most important services.

I hope, then, I have said enough—I am quite sure that I have not said one word too much—on the care required in the selection of a monthly nurse. It is impossible, when such vital interests are at stake, to be too particular, or to overstate the importance of the subject,



## CONCLUDING REMARKS ON PREGNANCY.

The premonitory symptoms of labour having commenced; everything being in readiness for the coming event—clothes, sheets, flannels, diapers, all well aired, everything in order, so that each and all may, even in the dark, at a moment's notice, be found; the bedroom well ventilated; the nurse being in the house; the doctor notified that he may be wanted—all the patient has to do is to keep up her spirits, and to look forward with confidence and hope to that auspicious moment which has been long expected, and which is now about to arrive, when she will become a mother! An event—the birth of her child, ushered as he will be into the world with a cry (oh, joyful sound!) which she will realize as the happiest moment of her existence. She will then be amply repaid for all her cares, all her anxiety, and all her anguish. “A woman when she is in travail hath sorrow because her hour is come; but as soon as she is delivered of her child, she remembereth no more the anguish, for joy that a man is born into the world.”—*St. John.*

A Wife is now about to assume an additional and higher title than that of Wife, namely, that of Mother.

## PART III.

### LABOUR.

*All women labouring of child.*—THE LITANY.

*Time of her travail.*—GENESIS.

*The child was prisoner to the womb ; and is*

*By law and process of great nature, thence*

*Freed and enfranchised.*—SHAKESPEARE.

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Before labour commences the child lies in the womb of its mother surrounded by fluid: this fluid is contained in a bag of thin elastic membrane, which is everywhere in contact with, and lightly adherent to the inner surface of the womb. The child is nourished by means of an organ called the afterbirth or placenta, which is also attached to the inner surface of the womb, and which performs the functions of lungs, stomach, kidneys, etc. From the navel of the child to the afterbirth there extends the navel-string, or cord, through which the blood passes backwards and forwards between the child and the afterbirth. At this time the mouth of the womb is closed.

During labour the womb contracts from time to time and endeavours to squeeze its contents into the vagina and thence into the world. During

these contractions of the womb the patient experiences pain, and these pains are called labour pains. As labour proceeds, the neck of the womb opens, and after a time the bag of membranes ruptures, and there is a sudden gush of fluid. The child now advances from the womb into the vagina, and is eventually born. After the birth of the child, the pains generally cease for a few minutes, and then return—but not so severely as before—and expel the after-birth and bag of membranes.

#### THE PRECURSORY SYMPTOMS OF LABOUR.

A day or two before the labour commences the patient often feels better than she has done for a long time: she is light and comfortable: she is smaller, and the child is lower down; she is more cheerful, breathes more freely, and is more inclined to take exercise, and to attend to her household duties. She has often an inclination to tidy her drawers, and to look up and have in readiness her own linen, and the baby's clothes, and the other requisites for the long-expected event. She seems to have a presentiment that labour is approaching, and she has the feeling that now is the right time to get everything in readiness, as, in a short time, she will be powerless to exert herself.

Although the majority of patients, a day or two before the labour comes on, are more bright and cheerful, some few are more anxious, fanciful, fidgety, and restless.

A few days, sometimes, a few hours, before labour commences, the child "falls," as it is called; that is to say, there is a *subsidence—a dropping—of the womb* lower down the abdomen.\* This is the reason why she feels lighter and more comfortable, and more inclined to take exercise, and why she can breathe more freely. It is at this time that the bowels frequently act, and thus make more room for the passage of the child. If they do not do so naturally, now is the time for the nurse to empty the lower bowel by enemata or by purgatives administered by the mouth. A woman should always go into labour with the bowels emptied.

The only inconvenience of the *dropping of the womb* is, that the womb presses more on the bladder, and sometimes causes an irritability of that organ, inducing a frequent desire to make water.

The *subsidence—the dropping of the womb* may then be considered one of the earliest of the *precursory symptoms* of childbirth, and as the herald of the coming event.

She has, at this time, an increased moisture of the vagina—the passage leading to the womb—and of the external parts. She has, at length, slight

\*To this there are many exceptions.)

pains, and then she has a "show," as it is called: which is the coming away of mucus. The "show" is generally tinged with a little blood. When a "show" takes place, she may rest assured that labour has actually commenced. One of the early symptoms of labour is a frequent desire to relieve the bladder.

She has now "*grinding pains*," coming on at uncertain periods; sometimes once during two hours, at other times every hour or half-hour. These "grinding pains" ought not to be interfered with; at this stage, therefore, it is useless to send for a doctor; yet the monthly nurse should be in the house, to make preparations for the coming event. Although at this early period it is *not* necessary to send for the medical man; nevertheless, it will be well to let him know that his services may shortly be required, in order that he may be in the way, or that he may leave word where he may quickly be found.

These "grinding pains" gradually assume more regularity in their character, return at shorter intervals, and become more severe.

About this time, shivering, in the majority of cases, is apt to occur, so as to make the teeth chatter again. Shivering *during labour* is not an unfavourable symptom; it proves, indeed, that the patient is in real earnest, and that she is making progress.

Although the patient shivers and trembles until, in some instances, the bed shakes under her, it is unaccompanied with real coldness of the skin; she shivers and feels cold, but her skin in reality is not at all cold, but is hot and perspiring—perspiring at every pore!

She ought not, on any account, unless it be ordered by the medical man, to take any stimulant as a remedy for the shivering. A cup either of *hot* tea or of *hot* gruel will be the best remedy for the shivering; and an extra blanket or two should be thrown over her, and be well tucked around her, in order to thoroughly exclude the air from the body. The *extra* clothing, as soon as she is warm and perspiring, should be gradually removed, as she ought not to be kept very hot.

*Nausea or Sickness* frequently comes on in the beginning of the labour, and may continue during the whole process. There may be not only a feeling of sickness, but actual vomiting, so that little or nothing can be kept on the stomach.

Now, sickness in labour is rather a favourable symptom, and is usually indicative of a kind and easy confinement. There is an old saying that “sick labours are safe.” Although they may be safe, they are decidedly disagreeable!

There is, in such a case, little or nothing to be done as the less an irritable stomach is meddled with the better. The sickness will probably leave off



as soon as the labour is over. Stimulants, unless prescribed by the doctor, ought not to be given.

She must not, on any account, force down—as her female friends, or as a “pottering” old nurse may advise—to “grinding pains;” if she does, it will rather retard than forward her labour.

During this stage she had better walk about or sit down, and not confine herself to bed; indeed, there is no necessity for her, unless she particularly desire it, to remain in her chamber.

If, at the commencement of her labour, the “waters should break,” even if there be no pain, the medical man ought immediately to be sent for; as in such a case it is necessary that he should know the exact presentation of the child—that is, the way it is coming into the world.

After an uncertain length of time, the pains alter in character. From being “grinding,” they become “bearing-down,” and more regular and frequent, and the skin becomes both hot and perspiring. These may be considered the *true* labour-pains. The patient ought to bear in mind then that the true labour-pains are situated in the back and loins; they come on at regular intervals, rise gradually up to a certain pitch of intensity, and abate as gradually; it is a dull, heavy, deep sort of pain, producing occasionally a low moan from the patient; not sharp or twinging, which would

elicit a very different expression of suffering from her.

As soon as the pains assume a "bearing-down" character, the doctor ought to be in attendance. If he be sent for during the *early* stage, when the pains are of a "grinding" character, and when they come on "few and far between," and at uncertain intervals, unless, as before stated, "the waters" should have broken early, he can do no good; for, if he attempted, in the *early* stage, to force on the labour, he would do irreparable mischief.

*Cramp* of the legs and thighs is a frequent, although not a constant, attendant upon childbirth. These cramps come on more especially if the patient be kept for a lengthened period in one position; hence the importance of allowing her, during the early stages of labour, to move about the room. Cramps are generally worse during the last stage of labour, and then, if they occur at all, they usually accompany each pain. The poor patient, in such a case, has not only to bear the labour-pains but the cramp-pains! Now, there is no danger in these cramps; it is rather a sign that the child is making rapid progress, as he is pressing upon the nerves which supply the thighs. The cramps show that the child's head has nearly reached the outlet, and so give an index that the

worst part of the labour is nearly over. That is to say, the actual passage of the child's head through the pelvis, or bony canal, between the hips, into the world.

The nurse ought to well rub, with her warm hand, the cramped parts; and, if the labour be not too far advanced, it would be well for the patient to change her position, and to sit on a chair, or, if she feel inclined, to walk about the room; there being, of course, an attendant to support her the while. If either a pain or a cramp should come on while she is thus moving about, let her instantly take hold of the bed-post for support. Often by quickly putting the heel of the affected leg firmly down on the floor or in the bed so that the thigh and leg may be rigidly straight, the cramp will quickly pass off.

Labour—and truly it may be called “labour.” The fiat has gone forth that in “sorrow thou shalt bring forth children.” Young, in his *Night Thoughts*, beautifully expresses the common lot of women to suffer—

“ ’Tis the common lot ;  
In this shape, or in that, has fate entailed  
The mother's throes on all of woman born,  
Not more the children than sure heirs of pain.”

Labour is a natural process, and therefore ought not unnecessarily to be interfered with, or woe be-

tide the unfortunate patient. I firmly believe that a woman stands a much better chance of getting well over her confinement *without* assistance than if she be hurried *with* assistance.

In a natural labour very little assistance is needed, and the doctor is only required in the room occasionally, to ascertain that things are going on rightly. Those ladies do best who are the least interfered with, both at the time and afterwards. Bear this in mind, and let it be legibly written on your memory. This advice, of course, only holds good in natural confinements.

Meddlesome midwifery cannot be too strongly reprobated. The duty of a doctor is to watch the progress of a childbirth, in order that, if there be anything wrong, he may remedy it; but if the labour be going on well, he has no business to interfere, and he need not be much in the lying-in room, although he should be in an adjoining apartment.

These remarks are made to set a lady right with regard to the proper offices of an accoucheur; as sometimes she has an idea that a medical man is able, by constantly "taking a pain,"\* to greatly expedite a natural labour. Now, this is a mistaken and mischievous, although, a popular, notion. The frequent "taking of a pain" is very injurious and most unnatural. It irritates and inflames the pas-

\* Making an internal examination.

sages, and frequently retards the delivery. The *occasional*, but only the *occasional*, "taking of a pain" is absolutely necessary to enable a medical man to note the state of the parts, and the progress of the labour; but the *frequent* "taking of a pain" is needless and very objectionable.

As a rule, then, it is neither necessary nor desirable for a medical man to be much in a lying-in room. Really, in a natural labour, it is surprising how very little his presence is required. After he has once ascertained the nature of the case, *which it is absolutely necessary that he should do*, and has found all going on "right and straight," it is better, much better, that he retire, in the day-time, to the drawing-room, in the night season, to a bedroom. Thus Nature will have full time and full scope to take her own course without hurry and without interference, without let and without hindrance. Nature hates hurry, and resents interference. For many reasons, the above advice is particularly useful. In the first place, there is no unnecessary interference with Nature. Secondly, it allows a patient, from time to time, to empty her bladder and bowels—which assists and expedites the progress of the labour. Thirdly, if the doctor is not present, he is not called upon to be frequently "taking a pain," which she may request him to do, as she fancies it does her good, and relieves her sufferings; but which frequent taking of a

pain, in reality, does her harm, and does not accelerate the birth of the child. No, a doctor ought *not* to be much in the lying-in room. Although it may be necessary that he be near at hand, within call, to render assistance towards the last, I emphatically declare that in an ordinary confinement—that is to say, in what is called a natural labour—the only time, as a rule, that the presence of the doctor can be useful, is *just* before the child is born; although he ought to be in readiness, and should therefore be in the house some little time before the event takes place. Let the above advice be strongly impressed upon your memory. If a patient did but know the importance of non-interference in an ordinary labour, and the blessedness of patience, what benefit would accrue from such knowledge—

“What cannot patience do?

A great design is seldom snatch'd at once;

'Tis patience heaves it on.”—*Thomson*.

Women are far more patient than men: it is well they are; for men would never be able patiently to endure, as women do, the bitter pangs of childbirth. Chaucer beautifully describes patience as a wife's gift, as

“This flour of wifely patience,”

Bear in mind, then, that in every well-formed woman, and in every ordinary confinement, Nature



is perfectly competent to bring, *without the assistance of man*,\* a child into the world, and that it is only an ignorant person who would, in a natural case of labour, interfere to assist Nature. Assist Nature! Can anything be more absurd? As though God in His wisdom, in performing one of His greatest wonders and processes, required the assistance of man. It might with as much truth be said that in every case of the process of *healthy* digestion it is necessary for a doctor to assist the stomach in the process of digesting the food! No, it is high time that such fallacies were exploded, and that common sense should take the place of such folly. A natural labour, then, ought *never* to be hurried or interfered with, or frightful consequences might ensue. Let every lying-in woman bear in mind that the more patient she is, the more kind and the more speedy will be her labour and her "getting about." Let her, moreover, remember then, that labour is a natural process—that all the "grinding" pains she has are doing her good service, are dilating, softening, and relaxing the parts, and preparing for the final or "bearing-down pains": let her further bear in mind *that these pains must not, on any account whatever, be interfered with* by the doctor, by the nurse, or by herself. These pains are sent for a wise pur-

\* "Through thee have I been holden up ever since I was born : thou art he that took me out of my mother's womb : my praise shall be always of thee."—*The Psalms of David*, lxxi. 6.

pose, and they ought to be borne with patience and resignation, and she will in due time be rewarded for all her sufferings and anxieties, by having a living child.

It might be thought that I am tedious and prolix in insisting on non-interference in a natural labour, but the subject is of paramount importance, and cannot be too strongly dwelt upon, and cannot be too often brought, and that energetically, before the notice of a lying-in woman.

Fortunately for ladies, there is great talent in the midwifery department, which would prevent—however anxious a patient may be to get out of her trouble—any improper interference. I say *improper* interference. A case sometimes, *although rarely* occurs in which it is necessary for the medical man to properly interfere and to help the delivery: then the patient must leave herself *entirely* in the hands of her doctor—to act as he thinks best. He may find it necessary to use promptness and decision, and thus to save her an amount of unnecessary lingering pain, risk, and anxiety. But these cases, fortunately, are exceptions—*rare exceptions*—and not the rule. It is, then, absolutely necessary, in some few cases, that a medical man should act promptly and decisively; delay in such emergencies would be dangerous—

“If it were done, when 'tis done, then 'twere well

It were done quickly.”—*Shakespeare*.

There are times, and times without number, when a medical man is called upon to do but little or nothing; and there are others—few and far between—when it is imperatively necessary that he should do a great deal. He ought, at all times, to be as gentle as a lamb, but should, in certain contingencies, be as fearless as a lion!

An accoucheur's hand must be firm, and yet gentle; his heart tender, and yet brave. Having made up his mind to the right course, he must pursue it without let or hindrance, without interference, without wavering, and without loss of time. Moments in such cases are most precious; they often determine whether the mother shall do well, and whether the babe shall live or die! How many a child has died in the birth, in a hard and tedious labour, from the use of instruments having been too long delayed! Instruments, that is to say, the forceps, in a proper case and judiciously applied, are most safe; they are nothing more than *thin* hands—to bring away the head—when the head is low enough in the birth—the doctor's hands being too *thick* for the purpose. Many hours of intense suffering, and many years of unavailing regrets from the needless loss of the child, might have been saved if instruments had been used the moment mechanical aid was indicated—that is to say in a case, for instance, where the child remained for some hours stationary in the birth, al-

though the pains continued intensely strong and very forcing. Hence the importance, in midwifery, of employing a man of talent, of experience, of judgment, and of decision. No branch of the profession requires more skill than that of an accoucheur.

*Should the husband be present during the labour?* Certainly not : but as soon as the labour is over and all the soiled clothes have been put out of the way, let him instantly see his wife for a few minutes, to whisper in her ear words of affection, of gratitude, and consolation.

The *first* confinement is generally twice the length of time of an *after* one, and usually the more children a lady has had, the quicker will be her following labours. But this is by no means always the case, as *some* of the *after* labours may be the *tedious*, while the *early* ones may have been the *quick* ones.

It ought to be borne in mind, too, that *tedious labours* are oftentimes *natural* and that they only require time and patience from all concerned to bring them to a successful issue.

It may be said that a *first* labour, as a rule, lasts six hours, while an *after* confinement probably lasts but three. This space of time, of course, does not usually include the *commencement* of labour-pains; but the time that a lady be *actually* said to be in strong travail. If we are to reckon from

the commencement of the labour, we should make the average duration of a *first* labour, eighteen; of an *after* one, six to nine hours.

When a lady marries late in life—for instance, after she has passed the age of thirty—her *first* labour is usually much more lingering, painful, and tedious, demanding a great stock of patience, from the patient, from the doctor, and from the friends. Notwithstanding, if she be not hurried and be not interfered with, both she and her babe will generally do remarkably well. Supposing a lady marries late in life, it is only the *first* confinement that is usually hard and lingering; the *after* labours are as easy as though she had married when young.

Slow labours are not necessarily dangerous; on the contrary, provided there has been no interference, a patient frequently has a better and more rapid recovery after a tedious than after a quick confinement—proving beyond doubt that Nature hates hurry and interference. It is an old saying, and I believe a true one, that a lying-in woman *must* have pain either *before* or *after* her labour; and it certainly is far preferable that she should have the pain and suffering *before* than *after* the delivery is over.

It is well for a patient to know that, as a rule, after a *first* confinement, after-pains are rare. This is some consolation, and is a kind of compensation for her usually suffering more with her *first* child.

The after-pains generally increase in intensity with every additional child. This only bears out, in some measure, what I before advanced, namely, that the pain is less severe and of shorter duration *before* each succeeding labour; and that the pain is greater and of longer duration *after* each succeeding one. The after-pains are intended by Nature to contract, to reduce the womb somewhat to its natural size, and to assist clots in coming away, and therefore ought not to be interfered with needlessly. A judicious medical man will, however, if the pains be very severe, prescribe medicine to moderate, not to stop them. A doctor fortunately possesses valuable remedies to alleviate the after-pains.

Nature, beneficent Nature, oftentimes works in secret, doing good service by preparing for the coming event, unknown to all around. Pain, in the *very earliest stages of labour*, is not a necessary attendant. Although pain and suffering are the usual concomitants of child-birth, there are, nevertheless, numerous well authenticated cases on record of *painless parturition*.

A natural labour may be divided into the following stages. First, the premonitory stage, comprises the "falling" or *subsidence of the womb* and the "show." Then the dilating stage, known by the pains being of a "grinding" nature, in which the mouth of the womb gradually opens or dilates



until it is sufficiently large to allow the exit of the head of the child. And finally the completing stage, indicated by the pains being of a "bearing-down" expulsive character, and by the passage of the child into the world.

Now, in the first or premonitory stage, which is much the longest of the stages, it is neither necessary nor desirable that the patient should be confined to her room; on the contrary, it is better for her to be moving about the house, and to be attending to her household duties.

In the dilating stage, it will be necessary that she should be confined to her room, but not to her bed. In this stage it is not at all desirable that she should keep her bed, or even lie much on it. She is better up and about, and walking about the room.

In the premonitory and the dilating stages she must not on any account, strain or bear down to the pains, as many ignorant nurses advise, as, by robbing her of her strength, it would only retard the delivery. Besides, while the mouth of the womb is dilating, bearing down cannot be of the slightest earthly use—the womb is not in a fit state to expel its contents. If by bearing down she could, but which fortunately she cannot, cause the expulsion of the child, it would, at this stage, be attended with frightful consequences—no less than with the rupture of the womb! Therefore,

for the future, let not a lady be persuaded, either by an ignorant nurse or by any officious friend, to bear down until the last or the completing stage, when bearing down will assist the pains to expel the child.

In the completing stage it is, of course, necessary that she should lie on the bed, and that she should, as above advised, bear down to the pains. The *bearing-down* pains will indicate to her when to *bear* down.

If, towards the last, she be in great pain, and if she feel inclined to do so, let her cry out, and it will relieve her. "Like as a woman with child, that draweth near the time of her delivery, is in pain, and crieth out in her pangs" (Isa. xxvi. 17). A foolish nurse will tell her that if she make a noise it will do her harm. Away with such folly, and have nothing to do with any such simpletons! One of the wisest men that ever lived gives excellent advice in this matter—

"Give sorrow words : the grief that does not speak  
Whispers the o'er-fraught heart, and bids it break."

*Shakespeare,*

Even in the last stage, she ought never to bear down unless the pain be actually upon her. In bearing down, the plan is to hold the breath, and strain down as though she were straining to have a stool.

By a patient adopting the rules above indicated,

much weariness will be avoided; cramp, from her not being kept long in one position, may be warded off; the labour, from her being amused by change of room and scene, will be expedited; and thus the confinement be deprived of much of its monotony and tediousness.

The pains of labour are sometimes heavy and dull, or what an intelligent patient of mine once described as "groany pains;" they are, occasionally, sharp and cutting—"knify pains;" while they are, at other times, boring and twisting—"corkscrewy pains." These are expressive terms, as many labour-patients will be able emphatically to endorse!

Nurses sometimes divide a labour into two kinds—"a back labour," and a "stomach labour." Now, in a "back labour," the patient will derive comfort by having her back held by the nurse. This ought not to be done by the *bare* hand, but let the following plan be adopted:—Let a pillow be placed next to the back, and then the nurse should apply firm pressure, the pillow intervening between the back and the nurse's hand or hands. If the above method be followed, the back will not be injured, which it otherwise would be by the pressure of the hard hand of the nurse. When the *bare* hand alone has been applied, I have known the back to continue sore and stiff for days. In a "stomach labour," firm pressure of the nurse's hand over the abdomen, during each throe, is of

great service; it helps the pain, and thus expedites the delivery. A tight broad binder pressing equally over the abdomen and held by the nurse from behind, greatly assists the action of the pains, and helps to press the child downwards.

Let a large room, if practicable, be selected for the labour, and let it be airy and well ventilated.

If the bedstead have a fixed footboard, a hassock should be placed against it, in order that the patient, during the latter part of the labour—during the bearing-down pains—may be able to plant her feet firmly against it, and thus be enabled the better to help the bearing down of her pains. Some also like something that they can grasp and pull on during the pains; such as a piece of towelling tied to the bedpost.

It might be well to state, that the patient should at such times wear a pair of slippers, in order that the feet may not be hurt by pressing against the hassock. These directions may appear trivial; but anything and everything that will conduce, in however small degree, to a patient's comfort, or advantage, or well-doing, is not out of place in these pages.

A single bed is to be preferred to a double bed, as it is much more convenient for the nurse. The modern twin bed is very suitable, as it allows of frequent changes, the patient being easily moved from one bed to the other.

## PREPARATIONS FOR LABOUR.

It is usual for the nurse or some experienced lady friend to advise as to the things necessary at and after the confinement for both mother and child, but the following list of articles may be useful to some.

## FOR THE CONFINEMENT.

A small firm table, covered with a clean towel, to hold bowls, antiseptics, etc.

Two dozen diapers, at least.

Obstetric binders, to be fastened with pins or buckles according to taste.

A large sized flannel petticoat, opening all the way down behind.

One dressing jacket. One dressing gown.

Safety pins.

Sanitary towels (largest size).

Mackintosh sheet, about 36ins. square.

A flannel receiver (for infant).

A skein of unglazed linen thread.

A small pair of blunt pointed scissors.

A piece of clean old linen, for wiping out child's mouth.

Two rubber hot water bottles.

One packet of absorbent cotton wool.

Foot bath. Slop pail.

Two or three small basins or enamelled bowls.

Quart jug. Bath thermometer.

Douche apparatus that can be boiled.

- Slipper bed pan. Feeding cup.  
 Graduated medicine glass. Enema syringe.  
 Large sized nail brush with wooden back (must be new).  
 Roller towel, to be used as pulley.  
 Soap. Kettle with boiling water.  
 An adequate supply of hot and cold water.  
 A large mackintosh sheet.  
 Absorbent accouchement sheet. } Useful but not  
 A 1lb. roll of Gamgee tissue. } essential.

## FOR THE BABY.

Cot. Basket with fittings. Bath. Scales.

*Clothes.*

- Four to six long sleeved woven or hand-knitted vests.  
 Six to eight monthly gowns.  
 Six to eight night gowns.  
 Two robes.  
 Two long white petticoats.  
 Three day flannels.  
 Three night flannels.  
 Two dozen diapers, first size.  
 Two to four dozen turkish squares.  
 Two head flannels.  
 Three to six flannel squares.  
 Four flannel binders.  
 One woollen shawl.  
 One woollen bonnet or hat.



One woollen or silk veil.

Three woollen jackets.

Woollen boots.

*Position of woman in labour.*—The position varies according to the country. Delivery, in some countries, such as in France, is usually effected while the patient is lying on her back; in other countries, while she is standing; in others, while she is on her knees; in others while she is in a kind of arm-chair, made for the purpose, with a false bottom to it, and called a “groaning chair;” and, in other instances, such as in England, the patient is delivered while she is on her left side, a safe method, and, both for the doctor and for the patient, by far the most delicate and convenient. In France the lying-in woman is usually delivered on a small bed specially prepared, which is called the “*lit de misere*.” This is a good plan, as she is moved afterwards into her clean bed.

I should strongly urge a patient *not* to put everything off to the last. Let everything necessary, both for herself and the babe, be well aired and ready for *immediate* use, and be placed in such order that all things may be found, without hurry or bustle, at a moment's notice.

Another preparation for childbirth, and a most important one, is attending to the state of the bowels. *If they be at all costive* the moment there is the slightest *premonitory* symptom of labour she

ought to take a dessert-spoonful or more of castor oil, according to the nature of her bowels, whether she be easily moved or otherwise. If she object to taking the oil, then let her have an enemá of warm water—a pint—administered. She will, by adopting either of the above plans, derive the greatest comfort and advantage; it will prevent her delicacy from being shocked by having her bowels opened, without her being able to prevent them, during the last stage of the labour; and it will, by giving the adjacent parts more room, much expedite the delivery, and lessen her sufferings.

The next thing to be attended to is the way in which she ought to be *dressed for the occasion*. I would recommend her to put on her clean nightgown; which, in order to keep it unsoiled, should be smoothly and carefully rolled up about her waist; then she ought to wear over it a short bed-gown reaching to her hips, and have on a flannel petticoat to meet it, and then she should over all put on a dressing-gown. If it be winter, the dressing-gown had better either be composed of flannel or be lined with that material.

*The stays must not be worn*, as by preventing the muscles of the chest and the abdomen from helping the expulsion of the child, they will interfere with the progress of the labour.

The valances of the bed, and the carpet, and the curtains at the foot of the bed, had

better all be removed; they are only in the way, and may get soiled and spoiled.

“*The guarding of the bed.*”—This is done in the following way:—Cover the *right* side of the bed, as the patient will have to lie on her *left* side, with a large piece, a yard and a half square, of water-proof cloth, or bed-sheeting as it is sometimes called, which is sold for the purpose; over this place folded sheets. If a waterproof cloth cannot be procured, an oil-cloth table-cover will answer the purpose. Either of the above plans will effectually protect the bed from injury. It is also wise to protect the carpet on the right side of the bed. This can be done with a piece of linoleum, old blanket, etc.

The lying-in room should be kept, not hot, but comfortably warm; if the temperature of the room be high, the patient may become irritable and restless.

In order to change the air, let the door of the room every now and then be left ajar; and if, in the early periods of the labour, the patient should retire for a while to the drawing-room, let the lying-in room window be thrown wide open, so as to thoroughly ventilate the apartment, and to make it fresh and sweet on her return. If the weather be warm, the upper sash of the window should be opened. It is wonderful how refreshing to the spirits, and how strengthening to the frame,

a well-ventilated room is to a woman in travail.

Many attendants are not only unnecessary but injurious. They excite and flurry the patient, they cause noise and confusion and rob the air of its purity. The doctor and the monthly nurse, are all that are needed.

Boisterous conversation during the progress of childbirth ought never to be permitted; it only irritates and excites the patient. Although noisy merriment is bad, yet at such times gentle, cheerful, and agreeable chat is beneficial; towards the conclusion of the labour, however, perfect quietude must be enjoined, as during the latter stage, talking, be it ever so little, is usually most distasteful and annoying to the patient. The only words that should then be spoken are a few words of comfort from the doctor, announcing from time to time, that the labour is progressing favourably, and that the pain and sorrow will soon be converted into ease and joy.

The attendants and all around a lying-in patient must be patient, let the patient herself be ever so impatient—she has frequently cause for her impatience; the bitter pangs of labour are oftentimes severe enough to make even an angel impatient! Not a note, then, of impatience must grate upon her ear; but words of gentleness, of encouragement, and of hope, must be the remedies used by those about her to soothe her impatience.

The mother of the patient on these occasions is often present; but of all persons she is the most unsuitable, as, from her maternal anxiety, she tends rather to depress than to cheer her daughter. Though the mother ought not to be in the *room*, it is, if practicable, desirable that she should be in the *house*. The patient, in the generality of cases, derives comfort from the knowledge of her mother being so near at hand.

Another preparation for labour is—to soothe her mind by telling her of the *usual* safety of confinements, and by assuring her that, in the generality of instances, it is a natural process, and no disease whatever; and that all she has to do is to keep up her spirits, to adhere strictly to the rules of her doctor, to have a little patience, and that she will do remarkably well.

Tell her, too, that “sweet is pleasure after pain”; and of the exquisite happiness and joy she will feel as soon as her labour is over, as perhaps the greatest thrill of delight a woman ever experiences in this world is when her babe is *first* born. She, as if by magic, forgets all the sorrow and suffering she has endured. Keble, in the *Christian Year*, well observes—

“Mysterious to all thought  
A woman’s prime of bliss,  
When to her eager lips is brought  
Her infant’s thrilling kiss.”

How beautifully, too, he sings of the gratitude of a woman to God for her safe delivery from the perils and pangs of childbirth—

“Only let heaven her fire impart,  
 No richer incense breathes on earth :  
 ‘A spouse with all a daughter’s heart,’  
 Fresh from the perilous birth,  
 To the great Father lifts her pale glad eye,  
 Like a reviving flower when storms are hushed on high.”

The doctor, too, will be able to administer comfort to her when he has examined her, and when he can assure her that it “is all right and straightforward”—that is to say, that the child is presenting in the most favourable position, and that every thing is progressing satisfactorily. He may, moreover, be able to inform her of the *probable* “duration of her labour.” There is nothing more comforting and consoling to a lying-in patient than for the medical man to be able to tell her of the probable time the labour will last, which, after he has examined he is often able to do; nothing to her is more insupportable than uncertainty—

“Uncertainty !  
 Fell demon of our fears ! the human soul,  
 That can support despair, supports not thee.”—*Mallet.*

Let me in this place urge upon the patient the importance of her allowing the doctor to inquire fully into her state. She may depend upon it that this inquiry will be conducted in the most



delicate manner. If there be anything wrong in the labour, it is in the *early* stage, and *before* the "waters have broken," that the most good can be done. If a proper examination be not allowed to the medical man whenever he deems it right and proper—and a judicious doctor will do it as seldom as with safety he can—her life, and perhaps that of her child, may pay the penalty of such false delicacy.

Brandy ought always to be in the house; but let me impress upon the minds of the attendants the importance of withholding it from a lying-in woman, unless it be ordered by the doctor. Numbers have fallen victims to its being indiscriminately given. I am of opinion that the great caution which is now adopted in giving stimulants to women in labour is one reason, among others, of the greater safety of the confinements of the present day, compared with those of former times.

Brandy should be considered as a medicine, as a valuable and as a powerful medicine, and, like all powerful medicines, should be prescribed by a doctor, and by a doctor only, who will indicate the fit time and proper dose to be given. If this advice be not strictly followed, deplorable consequences may, and probably will, ensue. According to the way it is used, brandy is either a faithful friend or a bitter enemy!

The best beverage for a patient during labour

is a cup of warm tea, or gruel, or arrowroot. It is folly in the extreme, during the progress of labour, to force her to eat; her stomach recoils from it, as at these times there is generally a loathing of food; and if we will, as we always ought to, take the appetite as our guide, we shall never go far wrong.

A patient during labour ought frequently to empty her bladder; she will by doing so add materially to her ease and comfort, and it will give the adjacent parts more room, and will thus expedite the delivery. I wish to call attention to this point. Many ladies, from false delicacy, especially with their first child, have suffered severely from not attending to it. One of the ill effects is inability, after the labour is over, to pass water without the assistance of the doctor. In an extreme case it would be necessary to introduce a catheter into the bladder, and thus draw the water off.

I recommended, in a previous paragraph, that the doctor ought to have either the drawing-room or a bedroom to retire to, in order that the patient might, during the progress of the labour, *be left very much to herself*, and that thus she might have full opportunities, whenever she felt the slightest inclination to do so, of thoroughly emptying either her bladder or bowels. *Now, this advice is of very great importance*, and if it were more followed than it is, a great diminution of misery, of annoyance, and suffering

would be effected. I have given the subject great attention, as I have had large experience in midwifery practice; I therefore speak "like one having authority," and if my "counsel" in this particular be attended to, this book will not have been written in vain.

If the patient, twelve hours after her delivery, after having tried two or three times during that time, be *unable* to empty the bladder, the medical man must be informed of the inability, or serious consequences may ensue.

### CHLOROFORM IN LABOUR.

Mothers and doctors are indebted to Sir James Simpson for the introduction of chloroform, one of the greatest and most valuable discoveries ever conferred on suffering humanity.\*

Chloroform is especially safe in labour, because the heart of a pregnant woman is stronger and more muscular than at other times. It is so because it has the extra work to do of pumping the blood

\*"Dr. Simpson, on first propounding the theory of the application of chloroform to patients requiring surgical aid, was stoutly opposed by certain Calvinistic objectors, who held that to check the sensation of pain in connection with 'visitations of God' was to contravene the decrees of an All-wise-Creator.

What was his answer? That the Creator, during the process of extracting the rib from Adam, must necessarily have adopted a somewhat corresponding artifice—"For did not God throw Adam in a deep sleep?" The Pietists were satisfied, and the discoverer triumphed over ignoble and ignorant prejudice."—J. S. Laurie, in *A Letter to the Times* May 11, 1870.

through the child's circulation in addition to that of the mother.

The inhalation of chloroform, according to the will of the operator, causes either partial or complete unconsciousness, and, either for a longer or for a shorter time, freedom from pain. In other words, the effects may with great benefit be continued either for a few minutes, or from time to time for several hours. Indeed, if given in proper cases, and by a judicious doctor, it may be administered for a long time with great benefit, and with perfect safety.

Oh, the delightful and magical effects of it in the cases above described; the lying-in room, from being in a state of gloom, despondency, and misery, is instantly transformed, by its means, into one of cheerfulness, hope and happiness!

When once a lying-in woman has experienced the good effects of chloroform in assuaging her agony, she importunately, at every recurrence of "the pain," urges her medical man to give her more! In all her subsequent confinements, having once tasted the good effect of chloroform, she does not dread it. I have frequently heard a lady declare that now she can have chloroform, she looks forward to the period of childbirth with confidence and hope, whether her labour shall be hard or lingering.

It might be asked—Does the inhalation of chloro-

form retard the patient's "getting about?" I emphatically declare *that it does not do so*. Those who have had chloroform *as a general rule*, have always had as good and as speedy recoveries as those who have not inhaled it.

One important consideration in the giving of chloroform in labour is, *that a patient has seldom, if ever, while under the effects of it, been known to die*; which is more than can be said when it has been administered in surgical operations, in the extraction of teeth, etc.

One reason why it may be so safe to give chloroform in labour is that, in the general practice of midwifery, a medical man does not deem it needful to put his patient under the *full* influence of it. He administers just enough to ease her pain, but not sufficient to rob her of total consciousness. In a surgical operation the surgeon generally considers it necessary to put his patient under the *full* influence of chloroform: hence the safety in the one, and the danger in the other case. It is quite possible to afford immense relief, to "render the pains quite bearable," as a patient of mine observed, by a dose which does not procure sleep or impair the mental condition of the patient, and which all our experience would show is absolutely free from danger.

Chloroform must not be given too soon, or it will retard labour, nor must too much of it be adminis-



tered, or it will produce a tendency to hæmorrhage after the birth of the child. Many patients request to have chloroform far too soon, during the dilating stage, and if their wishes were complied with some very undesirable consequences might ensue.

### HINTS TO ATTENDANTS IN THE UNAVOID- ABLE ABSENCE OF THE DOCTOR.

It frequently happens that, after the *first* confinement, the labour is so rapid that the child is born before the doctor has time to reach the patient. It is consequently highly desirable, nay, imperatively necessary, in the interest and for the well-doing both of the mother and of the babe, that either the nurse or the lady friend should, in such an emergency, know *what to do and what NOT to do*. I, therefore, in the few following paragraphs purpose, in the simplest and clearest language I can command, to enlighten them on the subject. As a matter of fact, all well-trained modern nurses are taught how to act in these circumstances.

In the first place, let the attendants be both calm and self-possessed, and let there be no noise, no scuffling, no excitement, no whispering, and no talking. Let the patient be made to thoroughly understand that there is not the slightest danger: the principal danger will be in causing *unnecessary* fears both as to herself and



her child:—"A woman, naturally born to fears, is, at these times, especially timid." Tens of thousands are annually delivered in England, and everywhere else, without the *slightest* assistance from 'a doctor,\* he not being at hand, or not being in time; and yet both mother and babe almost invariably have done well. Let her be informed of this fact, for it is a fact, and it will be a comfort to her, and will assuage her fears. The medical man, as soon as he arrives, will soon make all right and straight.

In the meantime let the following directions be followed: *Supposing a child to be born before the medical man arrives*, the nurse ought then to ascertain whether a coil of navel-string be around the neck of the infant; if it be, it must be instantly liberated, or he may be strangled. Care should be taken that he has sufficient room to breathe; that there be not a "membrane" over his mouth; and that his face be not buried in the clothes. Any discharge about the mouth of the babe ought, with a soft napkin, to be wiped away, or it will impede the breathing.

\* Dr. Vose said that once, when in the remote valleys of Westmoreland and Cumberland, he used to ask the people how they got on without medical aid, particularly in regard to midwifery cases; people wondered that he should ask. He found that they had no midwives even. When a woman begins her troubles, they told him, they give her warm beer; if she is worse, more warm beer; but if that fails, then 'she maun dee.' So they give stimulants from the first. One word in the paper read seemed to contain the gist of the matter; we must treat the patients according to 'common-sense.'—*British Med. Jour.*

The eyelids should also be carefully wiped and, where a nurse is present, the eyes themselves should be washed out with a solution of boracic acid (10grs. to the ounce) or a weak (1 in 5,000) solution of perchloride of mercury.

Every infant, the moment he comes into the world, ought to cry; if he does not naturally, he should be made to do so by smacking his buttocks until he does cry. He will then be safe—

“We came crying hither ;  
Thou know'st the first time we smell the air  
We waul and cry.”—*Shakespeare*.

It is well that the new-born child should cry, as by this means the lungs become properly inflated with air. It is essential, then, that it should be made to cry out. A few gentle slaps on the buttocks will, in a healthy child, secure this result.

If the doctor have not arrived, cheerfulness, quietness, and presence of mind must, by all around, be observed; otherwise the patient may become excited and alarmed, and dangerous consequences may ensue.

If the babe should be *born apparently dead*, but the navel cord is beating, a few smart blows must be given on the buttocks; or cold water may be freely sprinkled on the face. But after all, a good smacking of the buttocks, in an apparently still-born babe, is, in restoring animation, often the most *handy*, quick, and ready remedy. Thousands of apparently still-born children have, by

this simple remedy alone, been saved from threatened death. If you can once make an apparently still-born babe cry, *and cry he must*, as a rule he is safe. The navel-string, as long as there is pulsation in it, ought not to be tied.

If the infant is *born apparently dead and the navel cord has ceased beating*, the mouth must be wiped out, the cord tied and cut and the child at once put into a bath of temperature 105 degrees Fahrenheit, and in all probability the colour of the child will improve, and pulsations will return in the cord and will be followed in a short time by shallow respirations which in their turn will become deeper and followed by a cry. If this fails the infant should be lifted up by its ankles and the back smartly rubbed with a towel.

If these simple means should not *quickly* succeed, although they generally will, Dr. Marshall Hall's *Ready Method* ought in the following manner to be tried:—"Place the infant on his face; turn the body gently but completely *on the side and a little beyond*, and then on the face alternately; repeating these measures deliberately, efficiently, and perseveringly, fifteen times in the minute only."

Another plan of restoring suspended animation is by artificial respiration, which should be employed in the following manner:--Let the nurse, in the absence of the doctor, squeeze, with her left hand, the child's nose, to prevent any pas-

sage of air through the nostrils; then let her apply her mouth to the child's mouth, and breathe gently into it, in order to inflate the lungs; as soon as they are inflated, the air ought, with the right hand, to be pressed out again, so as to imitate natural breathing. Again and again for several minutes, and for about fifteen times a minute, should the above process be repeated; and the operator will frequently be rewarded by hearing a convulsive sob, which will be the harbinger of renewed life.

Until animation be restored, the navel-string, provided there be pulsation in it, ought not to be tied. If it be tied before the child have breathed, and before he have cried, he will not have such a good chance of recovery. While the navel-string is left entire, provided there be still pulsation in it, he has the advantage of the mother's circulation and support.

If a good smacking of the bottom, and if Dr. Marshall Hall's *Ready Method*, and if artificial respiration should not succeed, he must be immersed up to his neck in a warm bath 105 degrees Fahrenheit. A plentiful supply of warm water ought always to be in readiness, more especially if the labour be hard and lingering.

*A still-born infant* is one who is either at, or within a couple of months of the full time, and is—

"A child that was dead before he was born."—*Tennyson*.

*Should the child have been born some time before the doctor arrives*, it may be necessary to tie, and to divide the navel-string. The manner of performing it is as follows:—A ligature, composed of four or five whity-brown threads, nearly a foot in length, and with a knot at each end, ought, by a double knot, to be *tightly* tied, at about two inches from the body of the child, around the navel-string. A second ligature must, in a similar manner, be applied about three inches from the first, and the navel-string should be carefully divided midway between the two ligatures. Of course, if the medical man be shortly expected, any interference would not be advisable, as such matters ought always to be left entirely to him. Both the ligatures and the scissors used should have been previously boiled for ten minutes. If this be not done, there is a risk that the child may be infected with blood-poisoning through the navel.

*The after-birth* in the absence of hæmorrhage *must never be brought away by the nurse*. If the doctor has not yet arrived, it should be allowed to come away of its own accord, which, if left alone, in the generality of cases it usually will. The only treatment that the nurse ought in such case to adopt is, to hold the womb firmly with her left hand, this will have the effect of encouraging the contraction of the womb, of throw-



ing off the after-birth, and of preventing violent flooding.

If the after-birth does not soon come away—say in half an hour—or *if there be any flooding*, send for another medical man at once.—A well-trained nurse will know how to “express” the after-birth in case of urgent necessity, such as violent flooding.

Any attempt to extract the after-birth by pulling on the cord is fraught with danger, and should never be made.

*What should be done with the afterbirth?* Let the monthly nurse, after all the servants have gone to bed, make a good fire in the kitchen grate, and burn it.

Now as this chapter of “hints to attendants in the unavoidable absence of the doctor” is a most important one, indeed, one of the most important in this book, I think it well to summarize the foregoing remarks, making certain additions. I will divide the subject into—*What to do for the Mother* and *What to do for the Child*.

*What to do for the Mother.* Whilst the child is coming into the world, the *right* hand of the nurse should be ready to assist its progress, by removing any obstruction of the clothes, or by gently directing the best disposition of its body as the several parts come forward, so as to facilitate the birth. During this progress the *left* hand of the nurse should be spread over the abdomen, over the re-



gion of the womb, and firmly pressed against it. As the child leaves the womb, so will the womb itself become smaller under the hand. The hand must steadily follow the womb down in its decreasing size. With the birth of the child, the decrease will cease. After the birth of the child the patient is turned on her back and the nurse must hold the womb during the expulsion of the after-birth, and for half-an-hour after its expulsion. When the after-birth leaves the womb, the hand will immediately know this by the further decrease in the size. The nurse should now get some one to take charge of the abdomen, so that her hands may both be free to attend to the navel-string. As long as there is pulsation in the navel-string, it should not be tied. When the pulsation has ceased, let it be tied in the manner described. And here I would give a hint. A clean diaper should be placed under the part to be severed. By doing this, there will be no danger of hurting or amputating any neighbouring part, and any bleeding from the cord or sudden spurt of blood, at the time of severance, will be caught by the diaper. I have heard of untoward accidents and injury by the *not* using the diaper. All matters having progressed naturally, the after-birth should be seen protruding from the vagina—in fact just inside this passage. In removing the after-birth it is very essential that it

and the parts attached—called the membranes—should all be taken away, leaving nothing behind. This total removal can well be effected by gently grasping the after-birth, and, instead of drawing it out straight, twisting to the left or right on withdrawing it. By this method the membranes will be twisted round, any pieces will be caught, and any clots entangled, and all thus be easily taken away. If there should be any hæmorrhage from the womb either before or after the birth of the after-birth, the nurse should knead the womb, and if the after-birth is still in it, it should be squeezed out. The child can now be wrapped in a blanket and placed in a safe corner. The soiled linen and sheets about the hips and all remains of the confinement should be removed, the parts cleansed with a weak antiseptic lotion (Mercury Perchloride, 1 in 5,000), a good diaper applied, and the patient made comfortable. The nurse should now again take charge of the abdomen. The left hand should be over the womb, which she should gently knead at intervals to keep it well contracted. This she should do *for half an hour from the time* she makes her patient comfortable. When the womb has contracted, and there is all probability of safety from flooding, a stout binder should be firmly wrapped round the abdomen and well secured.

*What to do with the Child.* As it is coming into the world, the position of the navel-string must be

noticed. If it be round the child's neck, it should be unwound. If one of the arms gets twisted, it should be put straight. In doing this, it should be remembered to turn the arm towards the child's abdomen and in the direction of the hip, not of the shoulder. In many cases of tearing of the parts, properly known as "torn in the confinement"—that is, a rupture of the perineum—the too quick delivery of one of the child's shoulders has been the cause. It is well for the nurse to know this. The parts as they come forward should be supported. Directly the child is born, the mouth and nose should be wiped, and all discharge removed about them and about the eyes. The navel-string is to be severed on the conditions and in the manner already given. It is well, if the child does not cry at its birth, to give it a slap on the buttock. If there be no signs of life, then the nurse must resort to the methods already named. The child, breathing naturally, can be washed as soon as the nurse can safely leave the mother. In some cases, a child has lost its life from imperfect tying of the navel-string or disease in it. It behoves a nurse to look occasionally to see that the tying has been effectual, and that no hæmorrhage is taking place.

#### REST AFTER DELIVERY.

A lady ought not to be disturbed for at least two hours after the delivery.

Her head ought to be made easy; she must lie flat on her back, with a small pillow under her head—all soiled linen must be removed from under her and a clean, warmed draw-sheet substituted.

### CLOTHING AFTER LABOUR.

She ought, after the lapse of two hours or so, to be moved from one side of the bed to the other. It should be done in the most gentle and cautious manner. *She must not, on any account whatever, be allowed to sit erect in the bed.* While being moved, she herself should be passive—that is to say, *she ought to use no exertion—no effort*—but should, by two attendants, be removed from side to side; one taking hold of her shoulders, the other of her hips.

A patient, *after* delivery, usually feels shivery and starved; it will therefore be necessary to throw over her additional clothing, such as a blanket or two, to envelop the body, and be well tucked around her; but the nurse ought to be careful not to overload her with clothes; as soon therefore, as she be warmer, let the *extra* clothing be gradually removed. If the feet be cold, let them be wrapped in a warm flannel petticoat, or place a hot-water bottle near them.

A frequent change of linen after childbirth is desirable. Nothing is more conducive to health than cleanliness. Great care should be taken to have the sheets and linen well aired.

A foolish nurse fancies that clean linen will give her patient cold, and that dirty linen will prevent it, and keep her warm! Such folly is most dangerous! A lying-in woman should bear in mind that dirt breeds fever and fosters infectious diseases. There would be very little of fever, or of infectious diseases of any kind in the world, if cleanliness—of course I include *pure* water in this category—and ventilation were more observed than they are.

#### REFRESHMENT AFTER LABOUR.

A cup of tea, directly after the patient is confined, is refreshing, especially if the mouth is dry from chloroform. As soon as she is settled in bed, there is nothing better than a *small* basin of warm gruel or warm egg and milk.

Stimulants ought never to be given after a confinement, unless ordered by the medical man. Stimulants of all kinds must, unless advised by the doctor, be carefully avoided.

#### BANDAGING AFTER LABOUR.

This consists of thick linen, similar to sheeting, about a yard and a half long, and sufficiently broad to comfortably support the abdomen. The bandage ought to be put on moderately tight, and should be re-tightened every night and morning, or oftener if it become slack. An obstetric binder

is admirably adapted to give support after a confinement, and may be obtained of any respectable surgical instrument maker. If there be not either a proper bandage or binder at hand, a yard and a half of *unbleached* calico, folded double, will answer the purpose. The best pins to fasten the bandage are the patent safety nursery pins. The obstetric binder requires no pins.

A support to the abdomen after labour is important; in the first place, it is a great comfort; and in the second, it induces the stretched walls of the abdomen to return to their original state. Those ladies, more especially if they have had large families, who have neglected proper bandaging after their confinements, frequently suffer from an enlarged and pendulous abdomen, which gives them an unwieldy and ungainly appearance, indeed, completely ruining their figures. However, the importance of the binder in preserving the figure has been doubted by some modern authorities.

### THE POSITION AFTER LABOUR.

*The way to place the patient in bed.*—She ought *not*, immediately after a labour, under any pretext or pretence whatever, to be allowed to raise herself in bed. If she be dressed as recommended in a previous paragraph, her soiled linen may readily be removed; and she may be drawn up by two



assistants—one being at her shoulders and the other at her legs—to the proper place, *as she herself must not be allowed to use the slightest exertion.* Inattention to the above recommendation has sometimes caused violent flooding, fainting, bearing-down of the womb, etc., and in some rare cases even fatal consequences.

### THE LYING-IN ROOM.

*The room to be kept cool and well ventilated.*—A nurse is too apt, after the confinement is over, to keep a large fire. Nothing is more injurious than to have the temperature of a lying-in room high. A little fire, provided the weather be cold, to encourage a circulation of the air, is desirable. A fire-guard ought to be attached to the grate of the lying-in room. The door, in order to change the air of the apartment, must occasionally be left ajar, or the window be left open: a lying-in woman requires *pure* air as much as, or more than any other person; but how frequently does a silly nurse fancy that it is dangerous for her to breathe it!

Unventilated air is bad air: bad air is bad for every one, but especially for a lying-in patient. Bad air is only another name for poisoned air! Bad air is spent air, which has been breathed over and over again until it has become foul, and foetid, and quite unfitted to be, what it ought

to be, food for the lungs. Bad air is a wholesale poisoner. Bad air, bad drains, and bad water—water contaminated with sewer gas from drains or from the water closet—are the three Grand Executioners of England: they destroy annually many victims, selecting especially delicate women and helpless children!

After the labour is over, the blinds ought to be put down, and the window curtains drawn, in order to induce the patient to have a sleep, and thus to rest herself after her hard work. Perfect stillness must reign both in the room and in the house. This advice is most important.

It is really surprising, in this present enlightened age, how much ignorance there is still among the attendants of a lying-in room: they fancy labour to be a disease, instead of being what it really is, *a natural process*, and that old-fashioned notions, and not common sense, ought to guide them. Oh, it is sad that a child-bed woman should, of all people in the world, be in an especial manner the target for folly shafts to aim at!

The patient should, after the birth of her child, be strictly prohibited from talking, and noisy conversation ought not to be allowed; indeed, she cannot be kept too quiet, as she may then be induced to fall into a sweet sleep, which would recruit her wasted strength. As soon as the babe

be washed and dressed, and the mother be made comfortable in bed, the nurse ought alone to remain; let everyone else be banished from the lying-in room.

Visitors should on no account, until the medical man give permission, be allowed to see the patient. Many a patient has been made really feverish and ill by a thoughtless visitor, connived at by a simpleton of a nurse, intruding herself, soon after a confinement, into the lying-in room. It should be borne in mind, and let there be no mistake about it, that for the first ten days or a fortnight a lying-in woman cannot be kept too quiet; that excitement, at such times, is sure to be followed by debility; and that excitement is a species of dram-drinking, which leaves a sting behind! Bad gettings about are frequently due to visitors being allowed to see and to chatter with lying-in patients. It is high time that an end was put to this reprehensible practice. If a friend have the patient's welfare really at heart, she should not, until the expiration of at least ten days, visit her. Of course, inquiries may, from time to time, be made at the street door, but no visitors, during that time, should be admitted into the lying-in chamber. I am quite sure that, if this advice were followed, much suffering would be averted. Perfect rest after confinement is most essential to recovery, and is the best of medicines.

## THE BLADDER.

*Ought a patient to go to sleep before she have made water?*  
—There is not the least danger in her doing so, although some old-fashioned persons might tell her that there was; nevertheless, before she goes to sleep, she should, if she has the slightest inclination, respond to it, as it would make her feel more comfortable and sleep more sweetly.

Let me urge the importance of the patient, *immediately* after childbirth, making water while she is in a lying position. I have known violent flooding to arise from a lying-in woman being allowed, soon after delivery, to sit up while passing her water.

The “slipper bed-pan,”\* previously warmed by dipping it in very hot water and then quickly drying it, ought, at these times, and for some days after a confinement to be used. It is admirably adapted for the purpose, as it takes up but little room, and is conveniently shaped, and readily slips under the patient, and enables her to make water comfortably, she being perfectly passive the while. It should be passed under her from the front, and not from the side of the body.

If there be any difficulty in her making water, the medical man must, through the nurse, be *immediately* informed of it. False delicacy ought never

\* *The slipper bed-pan* may be procured either at any respectable earthenware warehouse, or of any chemist.

to stand in the way of this advice. It should be borne in mind that after either a *very* lingering or a severe labour, there is frequently *retention of urine*,—that is to say, that although the bladder may be full of water, the patient is, without assistance, unable to make it.

After the patient, while lying down, trying several times to pass her water, and after allowing six or eight hours to elapse, and not being able to succeed, it will be well for her to try the following method:—Let the nurse place a warm sponge, wrung out of hot water, over the lower part of the abdomen, and repeat doing so until the bladder has been relieved.

Another helpful method is to put some hot water into the slipper bed pan before placing it under the patient.

If this be not successful, twelve hours having elapsed, the doctor must be informed of the fact, and it will then be necessary, absolutely necessary, by means of a catheter, to draw off the water. It might be well to state that the passing of a catheter, if carefully done with antiseptic precautions, is *unattended with either the slightest danger or much discomfort*; and that it will afford *instant relief*. Sometimes one passing of the catheter is sufficient; at other times it has, for three or four days, or even for longer—that is to say, until the bladder has recovered its tone—to be passed daily.

If the patient would during the progress of her confinement, more especially if the labour be tedious, pass water frequently, say every two or three hours, the necessity of passing a catheter, after the labour is over, would often be prevented. Now this advice is worth bearing in mind.

### THE BOWELS

The bowels, after a confinement, are usually costive. This confined state of the bowels after labour is doubtless a wise provision of nature, in order to give repose to the surrounding parts—especially to the womb. Sometimes before the expiration of the second day the bowels are relieved, either without medicine or merely by the taking of a cupful of warm coffee. If such be the case, all well and good, as it is much better that the bowels should be relieved *without* medicine than *with* medicine; but if, having taken the coffee, at the end of 36 hours they are not opened, then early on the following morning—a dose of castor oil should be given in the manner previously recommended. About a tablespoonful is the usual dose, and if this has not the desired effect an enema should be administered. The old-fashioned custom was to give castor oil the morning after the confinement.

During the lying-in, and when the bowels are not opened either naturally or by the taking of a



cupful of warm coffee, let the nurse administer an enema of warm water—a pint each time. This is an excellent method of opening the bowels, as it neither interferes with the appetite nor with the digestion; it does away with the nauseousness of castor oil, and does not in the administration, give the slightest pain. If the first enema should not have the desired effect, another may be given in two or three hours, and the patient should be asked to retain it as long as possible. One of the best for the purpose—if the warm water be not sufficiently active—is the following:—

Take of—Olive Oil, two table-spoonsful ;  
Table Salt, two table-spoonsful ;  
Warm Oatmeal Gruel, one pint :

To make an enema.

Another capital enema for the purpose is one made of soft soap dissolved in warm water, with some ordinary salad oil or turpentine mixed with it. But if the warm water be sufficient for the purpose, so much the better—it is far preferable to either of the others. Remedies, provided they be effectual, cannot be too simple; and all that is usually required in such cases is, to wash the bowels out, which, as a rule, the warm water is of itself quite able to do; it is therefore desirable, before any other more complicated enema be used, simply to try the warm water only.

If the patient object both to the taking of the

castor oil and to the administration of an enema, then either a tea-spoonful of calcined magnesia, mixed in a little water, or the following draught, will be found useful; either one or the other will act kindly, and will neither gripe the mother nor the child:—

Take eight senna pods and pour on them three-quarters of a tumbler of boiling water, and then let them stand for three hours, and then drink the infusion the last thing at night.

If in twelve hours the above draught should not have the desired effect, although if the infusion of senna be good it usually does long before that time, let the draught be repeated. If the bowels be easily moved, *half* of the above draught is usually sufficient; if it be not so in twelve hours the remainder should be taken. Or, one or two tea-spoonsful of an electuary of figs, raisins, and senna may be eaten early in the morning. The electuary of figs, raisins, and senna is pleasant to the palate, and effectual in operation. But let every lying-in woman bear in mind that as soon as her bowels will act naturally, or by the taking of a cupful of warm coffee, or by the administration of a warm water enema, without an aperient by the mouth, not a particle of opening medicine should be swallowed. Much aperient medicine is hurtful.

After all then, that can be said on the subject, there is no better method in the world for open-

ing a lying-in patient's bowels, when costive, than, if the cup of coffee be not sufficiently powerful, by giving her an enema of warm water, as advised in previous paragraphs. An enema is safe, speedy, painless, and effectual, and does not induce costiveness afterwards, while castor oil and all other aperients most assuredly do.

An enema, then, is, both during suckling and during pregnancy, an admirable method of opening costive bowels, and deserves to be more universally adopted than it now is. Aperients by the mouth are both a clumsy and a roundabout way of opening costive bowels, and sometimes harass the patient exceedingly. The lower bowel, and not the stomach, wants emptying; the stomach wants leaving alone, and not to be worried by opening physic! The stomach has its proper work to do, namely, to digest the food put into it, with which aperients sadly interfere; hence the great value, in such cases, of an enema, and of keeping the bowels open, when possible, by fruit and not by physic, by gentleness and not by violence!

The regulation of the bowels after an extensive tear occurring during the confinement, must be ordered by the medical attendant.

Aperients, after a confinement, were in olden times, as a matter of course, repeatedly given both to the mother and to the babe, to their utter disgust and to their serious detriment! This was

only one of the numerous mistakes, prejudices, and follies that formerly prevailed in the lying-in room. Unfortunately, in those days a confinement was looked upon as a disease and to be physicked accordingly; there was some imaginary evil to be driven out! A better state of things is happily now beginning to dawn; but there is a great darkness of ignorance still to be dispelled. Ignorance is indeed darkness.

When the patient's bowels, for the first few days after her confinement, require to be opened, she ought to use the slipper bed-pan. It is a great improvement on the old-fashioned bed-pan, as it will readily slip under the patient, and will enable her, while lying down, and while she be perfectly passive in bed, to have her bowels relieved, which at these times is very desirable. The slipper bed-pan is admirably adapted for a lying-in room; indeed, no lying-in room ought to be without it. "A flannel cap for the toe part, held on by strings round the heel, will afford considerable comfort to the patient."

Of course, the above remarks are only intended for those who cannot have constant medical supervision.

#### "CLEANSINGS"—ABLUTIONS.

*The "Cleansings."*—This blood-stained discharge occurs directly after a lying-in, and lasts either a week or a fortnight, and sometimes even longer.

It is at first of a reddish colour; this gradually changes to a brownish hue, and afterwards to a greenish shade; hence the name of "green water." It has in some cases a disagreeable odour. A moderate discharge is necessary, but when it is very profuse or of an offensive odour there is generally something wrong.

Some ignorant nurses object to have the parts bathed after delivery; they have the impression that such a proceeding would give cold. Ablutions, indeed, at this time are far more necessary than at any other period of a woman's existence. Neglect of bathing the parts, at these times, is shameful neglect, and leads to miserable consequences.

There is nothing better for the purpose of these bathings than a soft, absorbent cotton-wool sponge and warm water, to which is added some antiseptic. If the parts be very tender and sore, a warm boracic fomentation, two or three times a day, will afford relief. The parts ought, after each fomentation, to be well but quickly dried with absorbent cotton-wool.

The douche, which was formerly employed in every case, is now only used in exceptional circumstances, and should only be administered if ordered by the medical attendant. A douche apparatus should, however, always be at hand at the time of the confinement, as, in cases of hæmorrhage after the birth of the child, a very hot douche is a most valuable remedy.



Let the above rules be strictly followed. Let no prejudices and no old-fashioned notions, either of the nurse or of any female friend, stand in the way of the above advice. Ablution of the parts, then, after a confinement, and that frequently, is absolutely required, or evil results will as a matter of course ensue.

### REST AND QUIETUDE.

A horizontal—a level—position for either ten days or a fortnight after a labour is important. A lady frequently fancies that, if she supports her legs, it is all that is necessary. Now, this is absurd; it is the womb, and not the legs, which requires rest; and the only way to obtain it is by lying flat either on a bed or on a sofa; for the first fourteen days, day and night, on a bed, and then for the next seven days she ought to be *removed for a short period of the day either to another bed or to a sofa*. The bed or sofa should be wheeled to the side of the bed, and she should be placed on it by two assistants, one taking hold of her shoulders and the other of her hips, and thus lifting her on to the bed or sofa, she herself being perfectly passive, and not allowed to sit erect the while. She ought, during the time she is on the sofa, to maintain the *level* position.

She ought, after the first fourteen days, to sit up for a little time; she should gradually prolong



the time of the sitting up; but still she must, for the first three weeks, lie down a great part of every day. She should, after the second week, lie either on a sofa or on a horse-hair mattress.

The above plan may appear irksome, but experience shows that it is necessary—absolutely necessary. The old saw, after a confinement, is well worth remembering: “To be soon well, be long ill.” The benefit the patient will ultimately reap from perfect rest and quietude will amply repay the temporary annoyance. Where the above rules have not been adopted, I have known flooding, bearing-down of the womb, and even “falling” of the womb, bad figures, frequent miscarriages, and ultimate ruin of the constitution, to ensue.

Poor women who go about too soon after their confinements frequently suffer from “falling of the womb.” An abundance of exercise during pregnancy, and perfect rest for a fortnight after labour, both the one and the other, cannot be too strongly insisted upon. Poor women have the advantage of exercise during pregnancy, and ladies of rest after labour. The well-to-do lady has the power, if she have but the inclination, of choosing the desirable and of discarding the objectionable feature of each plan; that is to say, of adopting, as the poor woman does, an abundance of exercise *before* her lying-in, and of taking, as the rich lady only can, plenty of rest *after* her confinement.

"Falling of the womb" is a disagreeable complaint, and the misfortune of it is, that every additional child increases the infirmity. Now, all this, in the majority of cases, might have been prevented, if the recumbent posture, for a fortnight after delivery, had been strictly adopted.

If a patient suffer from a "falling of the womb," she ought to apply to a medical man experienced in such matters.

### DIETARY.

*For the first day* the diet should consist of nicely-made and well-boiled gruel, arrow-root, and milk, bread and milk, tea, dry toast and butter, or bread and butter; taking care not to overload the stomach with too much fluid. Therefore, one cupful of gruel or of arrow-root, or of tea, at a time, should not be exceeded, otherwise the patient will feel oppressed. The old prejudice in favour of a low diet during the first days following delivery has died out. It is now understood that solid food may, in moderation, be taken with advantage.

*For the next (the second) day:—Breakfast*, dry toast and butter, or bread and butter and tea. *Luncheon*,—a breakfast-cupful of strong beef-tea,\* or of bread

\* There are few persons who know how to make beef-tea: let me tell you of a good way—my way—and which, as I was the inventor of this particular formula, I beg to designate as *Pye Charasse's Beef-tea*. Let the cook mince *very fine*—as fine as sausage-meat—one pound of the shoulder-blade of beef, taking care that every particle of fat be removed; then let her

and milk, or of arrow-root made with good fresh milk. *Dinner*—chicken, mashed potatoes, and bread. *Tea*, —the same as for breakfast. *Supper*, —a breakfast-cupful of well-boiled and well-made gruel, made with water or with fresh milk, or with equal parts of milk and water, or with water with a table-spoonful of cream added to it.

If beef-tea and arrow-root and milk be distasteful to the patient, or if they do not agree, then for luncheon let her have, instead of the beef-tea or the arrow-root, a light egg pudding or a little rice pudding.

*On the third and fourth days* : — Similar diet to the *second day*, with this difference, that for her dinner the patient should have mutton—a mutton chop or a cut out of a joint of mutton, instead of the chicken. The diet ought gradually to be improved, so that at the end of four days she should return to her usual

put the meat either into a saucepan or into a digester with three pepper-corns and a pint and a half of *cold* water : let it be put on the fire to boil ; let it slowly boil for an hour, and then let it be strained ; and you will have most delicious beef-tea, light and nourishing, grateful to the stomach and palate. When cold, carefully skim any remaining fat (if there be any) from it, and warm it up when wanted. It is always well, when practicable, to make beef-tea the day before it is wanted, in order to be able to skim it when quite cold. It may be served up with a finger or two of dry toast, and with salt to suit the taste. Sometimes the patient prefers the beef-tea *without* the pepper-corns ; when such be the case, let the pepper-corns be omitted.

If you wish your beef-tea to be particularly strong and nourishing, and if you have any beef bones in the house, let them be broken up and slowly boiled in a *digester* for a couple of hours, or even longer, with the finely-minced-up beef.

diet—provided it be plain, wholesome and nourishing.

The above, *for the generality of cases*, is the scale of dietary; but of course every lying-in woman ought not to be treated alike. If she be weak and delicate, she may from the beginning require good nourishment, and instead of giving her gruel, it may, from the *very commencement*, be necessary to prescribe good strong beef-tea, veal-and-milk broth,\* chicken broth, mutton chops, grilled chicken, game, the yolk and the white of an egg beaten up together in half a teacupful of good fresh milk, etc. Common sense ought, in the treatment of a lying-in as of every other patient, to guide us. We cannot treat people by rule and compass; we can only lay down general rules. There is no universal guide, then, to be followed in the dietary of a lying-in woman; each case may and will demand separate treatment. A delicate woman, as I have just remarked, may, from the very first day, require generous living; while, on the other hand, a strong, robust, patient may, for the first few days, require only simple bland nourishment, without a particle of stimulants; “and hence the true secret of success rests in the use of *common-sense and discretion*—common sense to read Nature aright, and discretion in making a right use of what the dictates of Nature

\*A knuckle of veal boiled in new milk makes a light and nourishing food for a delicate lying-in woman. Milk, in every shape and form, is an admirable article of food for the lying-in room

prescribe.”—*Edward Crossman*. Pickles, vinegar, and acid fruits must be avoided during suckling, or the baby will be griped.

### BEVERAGE.

*For the first week* :—Toast and water or barley-water and milk, with the chill taken off, is the best beverage. Barley-water, with or without the milk, forms an admirable drink for a lying-in woman; but in either case, it ought always to be taken flavoured with table salt. A little salt, then, should always be added to barley-water—it takes off its insipidity, it gives a relish which it otherwise would not possess. Some of my patients like it not only flavoured with salt, but also slightly sweetened with loaf sugar.

Stimulants during this time, unless the patient be weak and exhausted, or unless ordered by the medical man, ought not to be given.

All liquids given during this period should be administered by means of a feeding cup; this plan I strongly recommend, as it is both a comfort and a benefit to the patient; it prevents her every time she has to take fluids from sitting up in bed, and it keeps her perfectly still and quiet, which, for the first week after confinement, is very desirable.

When she is weak, and faint, and low, it may be necessary to give a stimulant, such as either a little wine—claret—or a little brandy mixed with hot water; but, as I before remarked, in the



generality of cases toast and water, or barley-water and milk, for the first week after a confinement, is the best beverage.

*Beverage in hot weather after a confinement.*—An excellent beverage to quench the thirst in hot weather, after a confinement, is cold, weak tea, with very little sugar, but with plenty of cream in it.

Tea, for breakfast and tea, during a “getting about,” is better than coffee ;but if tea be distasteful to a patient, then either cocoa or chocolate, made with one-half fresh milk, may be taken. Cocoa and chocolate are both invigorating and nourishing, and are very suitable as beverages, both at and after a confinement.

If the bowels, during a “getting about,” be costive, coffee is, from time to time, preferable to tea, cocoa, or chocolate; but not otherwise. Coffee, if used regularly, requires the taking of exercise, which of course, during a “getting about” is out of the question, although an occasional cup of coffee, merely to act as an aperient, is often of great service, as it will do away with the necessity of a lying-in woman swallowing an aperient—which is an important consideration. The best time for taking the cup of coffee is early in the morning. Coffee, then, after a confinement, ought to be taken, not as a beverage regularly, but as an aperient occasionally.

Sometimes neither wine nor malt liquor agree;



then equal parts of new milk and water, or equal parts of fresh milk and barley-water, will generally be found the best beverage. If milk should also disagree, either barley-water, or toast and water, ought to be substituted.

Milk will often be made to agree with a nursing mother if she will *always* take it mixed with an equal quantity of water.

The water added to the milk—in the proportions indicated—prevents the milk from binding up the bowels, which it otherwise might do; not only so, but milk without the addition of an equal quantity of water is often too heavy for the stomach easily to digest.

I have for nearly forty years paid great attention to the subject, and have come to the conclusion that *water is a most valuable aperient*. Milk by itself binds up the bowels, producing obstinate costiveness. Now, the mixing of an equal quantity of water with the milk entirely deprives milk of its binding qualities, and keeps the bowels in a regular state. These facts are most important to bear in mind. I know them to be facts, having had great experience in the matter, having made the subject my especial duty. I had the honour of first promulgating the doctrine that water, in proper quantities, is a valuable aperient; and that water, in due proportions, mixed with milk, prevents the milk from confining the bowels, which it otherwise would do.

## CHANGE OF ROOM.

*The period at which a lying-in woman should leave her room* will, of course, depend upon the season, and upon the state of her health. She may change, after the first twenty-one days, the chamber for the drawing-room, provided it be close at hand; if it be not, she ought, during the day, to remove—be either wheeled or carried in a chair—from one bedroom to another, as change of apartment will then be desirable. The windows, during her absence from the room, ought to be thrown wide open and the bed-clothes, in order that they may be well ventilated, should be thrown back. She may at the end of four weeks begin to take her meals with the family; but even then she ought to lie down on her bed for at least one hour during the afternoon or before dinner.

It is also well to remember that just as it takes nine months for the development of the internal parts during pregnancy, so it takes from six to eight weeks for these parts to grow small again and to resume their original condition.

## EXERCISE IN THE OPEN AIR.

The period at which a lady ought, after her confinement, to take exercise in the *open air* will, of course, depend upon the season and upon the state of the wind and weather. In the *winter* not until the expiration of a month, and not even then

unless the weather be fine for the season. Carriage exercise will at first be most suitable. In the *summer* she may, at the end of four weeks, take an airing in a carriage, provided the weather be fine and the wind be neither in an easterly nor in a north-easterly direction. At the expiration of the fifth week, she may, provided the season and weather will allow, go out of doors regularly, and gradually resume her household duties and employments.

#### HOUSEHOLD EMPLOYMENT.

Some persons have an idea that a wife, for some months after childbirth, should be treated as an invalid—should lead an idle life. This is an error; for of all people in the world, a nursing mother should remember that “employment is Nature’s physician, and is essential to human happiness.”—*Galen*. The best nurses and the healthiest mothers, as a rule, are working men’s wives, who are employed from morning until night, who have no spare time unemployed to feel nervous, or to make complaints, or to make a fuss about aches and pains; indeed, so well does “Nature’s physician”—employment—usually make them feel, that they have really no aches or pains at all, either real or imaginary, of which to complain, but are hearty and strong, happy and contented; indeed, the days are too short for them.

## PART IV.

### SUCKLING.

*The hour arrives, the moment wish'd and fear'd,  
The child is born ; by many a pang endear'd !  
And now the mother's ear has caught his cry—  
Oh ! grant the cherub to her asking eye !  
He comes—she clasps him ; to her bosom press'd,  
He drinks the balm of life, and drops to rest.—ROGERS.*

*'Tis sweet to view the sinless baby rest,  
To drink its life-spring from the nursing breast ;  
And mark the smiling mother's mantling eyes,  
While hushed beneath the helpless infant lies ;  
How fondly pure that unobtruding pray'r,  
Breath'd gently o'er the listless sleeper there.*

R. MONTGOMERY.

*The starting beverage meets the thirsty lip ;  
'Tis joy to yield it, and 'tis joy to sip.—ROSCOE.*

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### THE DUTIES OF A NURSING MOTHER.

A mother ought not, unless she intend to devote herself to her baby, to undertake to suckle him. She must make up her mind to forego the so-called pleasures of a fashionable life. There ought in a case of this kind to be no half-and-half measures ; she should either give up her helpless babe to the tender mercies of a nurse, or she must devote her whole time and energy to his

welfare—to the greatest treasure that God has given her.

If a mother be blessed with health and strength, and if she have a good breast of milk, it is most unnatural and very cruel for her not to suckle her child—

A mother who is able to suckle her child, but who, nevertheless, will not do so, can have but little love for him; and as indifference begets indifference, there will not be much love lost between them; such a mother is not likely to look after her children, but to leave them to the care of servants. Of such a family it may truly be said—

“There children dwell who know no parent's care,  
Parents who know no children's love dwell there.”

*Crabbe.*

If a mother did but know the happiness that suckling her babe imparts, she would never for one moment contemplate having a nurse to rob her of that happiness. Lamentable, indeed, must it be, if any unavoidable obstacles should prevent her from nursing her own child.

Moreover, if a mother does not suckle her child herself, she is very likely soon to be in the family-way again. This is an important consideration, as frequent child-bearing is much more weakening to the constitution than is the suckling of children, indeed, nursing as a rule, instead of weakening, strengthens the mother's frame. “Those mothers who nurse and cherish their own offspring

are not only more truly *mothers*, but they have a double reward in that, while their children thrive and thus gladden their hearts, they themselves are also very materially benefited. No woman is so healthy as she who bears healthy children healthily."

—*Dr. Alfred Wiltshire.*

A mother should remember that, if she be strong enough to become pregnant, to carry her burden for nine months, and at the end of that time to bear a child, she, as a rule, is strong enough to nurse a child. Suckling, is a healthy process, and not a disease, and is, therefore, usually most beneficial to health. It is very cruel and most unnatural for a mother, if she be able, not to nurse her own child; even the brute beasts, vile and vicious though they be, suckle their offspring:—"Even the sea monsters draw out the breast; they give suck to their young ones; the daughter of my people is *become* cruel, like the ostriches in the wilderness."—*Lamentations.*

Ponder well, therefore, before it be too late, on what I have said—health of mother and health of babe, human life and human happiness are at stake, and depend upon a true decision.

### THE BREASTS.

As soon as the patient has recovered from the fatigue of her labour—that is to say, in about four or six hours—attention ought, more especial-



ly in a *first* confinement, to be paid to the bosoms.

In a *first* confinement there is, until the third day, but very little milk; although there is usually on that day, and for two or three days afterwards, a great deal of swelling, hardness, distension, and uneasiness of the breasts; in consequence of which, in a *first* confinement, both care and attention are needed.

Not only so, but there may be at this time, a degree of feverishness; which in some cases, is rather severe.

If there be milk in the breasts, which may be readily ascertained by squeezing the nipple between the finger and the thumb, the infant should at *first* be applied, not *frequently*, as some do, but at considerable intervals, say, until the milk be properly secreted, every four hours; when the milk flows, the child ought to be applied more frequently, but still at stated times. A good rule is to put the child to the breast three times in the first 24 hours; four times in the second 24 hours, and every two hours during the third and following days, if the milk has come in.

To wash away any viscid secretion from the nipple, or any stale perspiration from the bosom, let the breasts and the nipples, before applying the babe, be first sponged with a little warm boracic lotion (grains 10 to the ounce) and then be dried with a warm, dry, soft napkin. If after

the above cleansing process there be any difficulty in making him take the bosom, smear a little cream or a little glycerine or sugar on the nipple, and then immediately apply him to it.

If the breasts be full, hard, knotty, and painful, which they generally are two or three days after a *first* confinement, let them be well but tenderly rubbed every four hours with the best olive oil a little of which should before using it be previously warmed, by putting a little of the oil, in a tea-cup on the hob by the fire; or with equal parts of olive oil and of *eau de Cologne*, which should be well shaken up in a bottle every time before it is used. The breast should always be rubbed from its outer margin towards the nipple.

Then the breasts should be supported by a binder made of linen which encircles the chest and keeps the breasts from dragging; the fastening being by means of safety pins done up in front.

The size of the bosoms under the above management will in two or three days decrease, all pain will cease, and the infant will, with ease and comfort, take the breasts.

*Second and succeeding Confinements.*—If the breasts are tolerably comfortable, which in the second and in succeeding confinements they probably will be, let nothing be done to them, except, as soon as the milk comes, applying the child, at regular intervals, alternately to each of them. Many a

bosom has been made uncomfortable, irritable, swollen, and even has sometimes gathered through the nurse's interference and meddling. Meddlesome midwifery is bad, and I am quite sure that meddlesome breast-tending is equally so. A nurse, in her wisdom, fancies that by rubbing, by pressing, by squeezing, by fingering, by liniment, and by drawing, that she does great good, while in reality, in the majority of cases, by such interference she does great harm.

The child will, in *second* and in *succeeding* confinements, as a rule, be the best and only doctor the bosoms require. I am quite convinced that, in a general way, nurses interfere too much, and that the bosoms in consequence suffer. It is, of course, the doctor's and not the nurse's province, in such matters, to direct the treatment; while it is the nurse's duty to fully carry out the doctor's instructions.

There is nothing, in my opinion, that so truly tells whether a nurse be a *good* one or otherwise, than by the way she manages the breasts. A *good* nurse is judicious, and obeys the doctor's orders to the very letter, while, on the other hand, a *bad* nurse acts on her own judgment, and is always quacking, interfering, and fussing with the breast, and doing on the sly what she dare not do openly. Such conceited, meddlesome nurses are to be studiously avoided.

Let the above advice be borne in mind, and much trouble, misery, and annoyance will be averted! Nature, in the majority of cases, manages these things much better than any nurse possibly can do, and does not, as a rule, require helping. The breasts are sadly too much interfered with and handled by nurses, and by nurses who are in other respects tolerably good ones. No; Nature is usually best left alone: she works in secret, deftly and well, and resents interference—more especially in the cases I have just described. Nature, then, is generally best left alone. As Chaucer beautifully expresses it—

“Nature, the vicar of the Almighty Lord.”

#### STATED TIMES FOR SUCKLING.

After the new-born babe is washed, he generally falls asleep, and, if not disturbed, sleeps on for several hours. It is not necessary to rouse him from his slumber to give him sustenance—certainly not; the mother's milk is not always ready for him; but as soon as it is, he instinctively awakes, and becomes importunate, and cries until he is able to obtain it. Nature—beneficent Nature—if we will but listen to her voice, will usually tell us *what to do* and *what not to do*. The teasing of a mother's breasts by putting the babe to them before there be milk, and the stuffing of a new-born infant with artificial food, are evils of great magnitude, and cannot be too strongly condemned.

A mother ought to suckle her babe at stated times. It is a bad habit to give him the bosom every time he cries, regardless of the cause; for be it what it may—overfeeding, griping, “wind,” or acidity—she is apt to consider the breast a panacea for all his sufferings. A mother generally suckles her baby too often, having him almost constantly at the breast. This practice is injurious both to parent and to child. For the first month he ought to be suckled about every two hours; for the second month, every two-and-half to three hours—gradually increasing, as he becomes older, the distance of time between, until at length he has it about every four hours. If he were suckled at stated periods he would only look for the bosom at those times, and be satisfied. The last feed at night, should be at 10 p.m., and the infant will then probably sleep till 4 a.m., after the first two weeks of life.

A mother frequently allows her babe to be at the bosom a great part of every night. Now, this plan is hurtful both to her and to him; it robs them both of their sleep; and generates bad habits, which it will be difficult to break through; it often gives the mother a sore nipple and the child a sore mouth; it sometimes causes the mother to have a gathered breast, and fills the child with “wind.” But this practice is positively dangerous

to the child while it is very young, as many infants have been smothered in this way by their mothers falling asleep. No young child should ever be allowed to sleep with its mother.

It is surprising how soon an infant, at a very early age, may, by judicious management, be brought into good habits. It only requires, at first, a little determination and perseverance. A nursing mother therefore ought at once to commence by giving her child the breast at stated periods, and should rigidly adhere to the times above recommended.

#### DIETARY.

A nursing mother ought to live plainly; her diet should be both light and nourishing. It is a mistaken notion that at these times she requires *extra* good living. She ought never to be forced to eat more than her appetite demands; if she is, indigestion, heartburn, sickness, or costiveness may ensue. It is folly at any time to force the appetite. If she be not hungry, compelling her to eat will do her more harm than good. A medical man in such a case ought to be consulted.

The best meats are mutton and beef. *Salted* meats are hard of digestion; if boiled beef therefore be eaten, it ought to be only *slightly* salted. It is better, in winter, to have the boiled beef *unsalted*; it is then, especially if it be the rump, de-



liciously tender. Salt, of course, must be eaten with the *unsalted* meat. Highly-seasoned dishes are injurious; they may disorder the milk.

Some persons consider that there is no care required in the selection of the food, and that a nursing mother may eat anything, be it ever so gross and unwholesome; but if we appeal to reason and to facts, we shall be borne out in saying that great care is required. It is well known that cow's milk very much partakes of the properties of the food on which the animal lives. Thus, if a cow feeds on swedes, the milk and the butter will have a turnipy flavour. This, beyond, a doubt, decides that the milk does partake of the qualities of the food on which she feeds. The same reasoning holds good in the human species, and proves the absurdity of a nursing mother being allowed to eat anything; be it ever so gross, indigestible, or unwholesome. Again, a dose of purgative medicine given to her, or greens taken by her at dinner, will sometimes purge the baby as violently, or even more so, than it will the mother herself.

Even the milk of a healthy wet nurse acts differently and less beneficially upon the child than the mother's *own* milk. The ages of the mother and of the wet nurse, the ages of her own and of the latter's infant, the constitutions of the one and of the other, the adaptability of a mother's milk for

her own particular child—all tend to make a foster-mother not so desirable a nurse as the mother herself. Again, a mother cannot at all times get to the antecedents of a wet-nurse; and, if she can, they will not always bear investigation. Every wet-nurse should now-a-days be subjected to a blood test.

With regard to the ages of the mother and of the wet nurse—for instance, as a wet nurse's milk is generally a few weeks older than the mother's own milk, the wet nurse's milk may, and frequently does, produce costiveness of the bowels of her foster-child; whilst, on the other hand, the mother's own milk, being in age just adapted to her babe's, may and generally does, keep her own infant's bowels regular. The milk, according to the age of the child, alters in property and quality to suit the age, constitution, and requirements of her baby—adapting itself, so to speak, to his progressive development: hence the importance of a mother, if possible, suckling her own child.

A babe who is nursed by a mother who lives grossly is more prone to disease. A nursing mother, who, although she lives on nourishing diet, yet lives simply and plainly, has usually the purest, as well as the most abundant supply of milk.

Do not let me be misunderstood. I am not advocating that a mother should be unnecessarily particular—by no means. Let her take a variety

of food, both animal and vegetable; let her from day to day vary her diet; let her ring the changes on boiled and stewed, on grilled and roast meats; on mutton, and lamb, and beef; on chicken, and game, and fish; on vegetables, potatoes, and turnips; on broccoli and cauliflower; on peas (provided they be young and well boiled), and French beans:—"The maxim of the greatest importance in reference to the materials of human food is, mixture and variety—a maxim founded, as has been stated, upon man's omnivorous nature. Animal and vegetable substances, soups, and solid meat, fish, flesh, and fowl, in combination or succession, ought, if due advantage is to be taken, of the health-sustaining element in food, to form the dietary of every household."—*Good Words*.

But what I object to a nursing mother taking are: gross meats, such as goose and duck; highly-salted beef; shell-fish, such as lobster and crab; rich dishes; *highly-seasoned* soup; pastry, unless it be plain; pickles and condiments; and any other article of food which is rich, or gross, or indigestible, and which, from experience, she has found to disagree either with herself or with her child. It will therefore be seen, from the above catalogue, that my restrictions as to diet are limited, and are, I hope, founded both on reason and on common sense—which ought to be the guides and counsellors of every nursing mother, and of every one else besides.

A moderate quantity—say a tumblerful—either of fresh *mild* ale or of porter will generally be found the best beverage both for dinner and for supper. There is more nourishment in ale and porter than in wine; therefore, for a nursing mother, either ale or porter is far preferable to wine. Wine, if taken at all, ought to be used very sparingly, and then not at the same meal with the porter or ale. Where a lady is in the habit of drinking wine, the quantity should not be increased, and ought never to exceed a couple of glasses—good claret being the best for the purpose.

A nursing mother is subject to thirst: when such is the case, she ought not to fly either to beer or to wine to quench it; this will only add fuel to the fire. The best beverages will be toast and water, milk and water, barley-water, barley-water and new milk in equal proportions, or tea, either hot or cold: cold tea is a good quencher of thirst.

A lady who is nursing is at times liable to fits of depression. Let me strongly urge the importance of her abstaining from wine and from all other stimulants as a remedy; they would only raise her spirits for a time, and then depress them in an increased ratio. A drive in the country, or a short walk, or a cup of tea, or a chat with a friend, would be the best medicine. The diet should be good and nourishing; plenty of

bread and plenty of meat should be her staple food, in addition to which corn-flour, made either with fresh milk or with cream and water, is in these cases most useful and sustaining. The best time for taking it is either for luncheon or for supper. A lady subject to depression should bear in mind that she requires nourishment, not stimulants—that much wine and spirits might cheer her for the moment, but will assuredly depress her afterwards. Depression always follows overstimulation; wine and spirits, therefore, in such a case, if taken largely, are false and hollow friends. How many a wife owes her love of stimulants, and her consequent degradation and destruction, to a stimulant having been at first prescribed for her for some trifling ailment. I will maintain that it is highly dangerous to prescribe a powerful stimulant to any patient, unless her case urgently demands it—unless it be, in point of fact, a case of life or death. It is emphatically playing with a deadly poison, tempting to evil, and courting disease, destruction and death.

Powerful stimulants—as brandy, rum, gin, and whisky—are most injurious during suckling. I may even say that they are to the parent, and indirectly to the child, insidious poisons.

When an infant is labouring under any disorder of the bowels, a nursing mother ought not to take stimulants, such as either ale or wine. In a case

of this kind, toast and water for her dinner will be the best beverage; gruel for her supper; and tea both for her breakfast and tea.

### FRESH AIR AND EXERCISE.

Outdoor exercise during suckling cannot be too strongly insisted upon; it is the finest medicine both for babe and mother. Whenever the weather will permit, it must be taken. It is utterly impossible for a nursing mother to make good milk unless she takes moderate exercise, and breathes plenty of fresh air.

Whatever improves the health of the mother, of course, at the same time benefits the child: there is nothing more conducive to health than an abundance of outdoor exercise. It often happens that a mother who is nursing seldom leaves her house; she is a regular fixture, or like a plant that vegetates in one spot; the consequence is both she and her babe are usually delicate and prone to sickness;—it would, indeed, be strange if they were not.

A mother ought not to nurse her infant *immediately* after taking exercise, but should wait for half an hour; nor should she take *violent* exercise, as it might disorder or diminish the quantity of the milk.

Carriage driving, if the weather be hot and sultry, is preferable to walking; if that be not



practicable, she ought to have the windows thrown wide open, and should walk about the hall, the landings, and the rooms, as she would by such means avoid the intense heat of the sun. Although carriage driving during intensely hot weather is preferable to walking exercise; yet, notwithstanding, walking must, during some portion of the day, be practised. There is no substitute as far as health is concerned, for walking. Many ailments that ladies now labour under could be walked away; and really it would be a pleasant physic—far more agreeable and effectual than either pill or potion!

#### THE TEMPER.

Passion is injurious to the mother's milk, and consequently to the child. Sudden joy and grief frequently disorder the infant's bowels, producing griping, looseness, etc.; hence, a mother who has a mild, placid, even temper generally makes an excellent nurse. It is a fortunate circumstance that she is frequently better tempered during suckling than at any other period of her life; indeed, she usually, at such times, experiences great joy and gladness.

The happiest period of a woman's existence is, as a rule, when she first becomes a mother. "The pleasure of the young mother in her babe is said to be more exquisite than any other earthly bliss."—*Good Words*.

It is an old, and I believe, a true saying, that the child inherits the temper of his mother. This may be owing to the following reasons:—If the mother be good-tempered, the milk will more likely be wholesome, which will of course make the child more healthy, and consequently better tempered; while, on the other hand, if the mother be of an irritable, cross temper, the milk will suffer, and will thus cause a derangement of the child's system; and hence, ill-health and ill-temper will be likely to ensue. We all know the influence that good or bad health has on the temper. An important reason, then, why a nursing mother is often better tempered than at other times, is, she is in better health, her stomach is in a healthier state—

“A good digestion turneth all to health.”—*Wordsworth*.

There is an old and true saying, that it is the stomach that makes the man, and if the man, the woman also—

“Your stomach makes your fabric roll,  
Just as the bias rules the bowl.”—*Prior*.

Depend upon it, that, after all that can be said on the subject, it is a good stomach that makes both man and woman strong, and conduces so much to longevity. If the stomach be strong, there is a keen appetite and a good digestion, and in consequence of such a happy combination, good health and long life—

"Now good digestion wait on appetite,  
And health on both."—*Shakespeare*.

Inquire of your friends who are octogenarians, and you will almost invariably find that they have wonderfully strong stomachs, and, consequently, good appetites and splendid digestions! And if perchance they have severe illnesses, how surprisingly they pull through them! A good stomach, then, is much to be coveted; but both self-denial and consideration are requisite to ensure one.

Cheerfulness, too, is mainly owing to a good stomach. A melancholic person is usually a dyspeptic; while a cheerful person is generally blessed with a good digestion. It is the stomach, then, that has the principal making of a cheerful disposition! It is almost an impossibility for a dyspeptic to be thoroughly happy, contented, or cheerful. A good stomach fills the possessor's heart with joy, causes the face to gleam with gladness, and thus—

"Make sunshine in a shady place."

### OCCUPATION.

I strongly recommended a nursing mother to attend to her household duties. She is never so happy, or so well, as when her mind is moderately occupied with something useful. She never looks so charming as when she is attending to her household duties—

"For nothing lovelier can be found  
In woman, than to study household good."—*Milton*.

I do not mean by occupation, the frequenting of balls, or of parties. A nursing mother has no business to be at such places; she ought to devote herself to her infant and to her household, and she will then experience the greatest happiness the world can afford.

One reason why the poor make so much better nursing mothers than the rich is, the former have so much occupation. The latter having no real work to do, the health becomes injured, and in consequence the functions of the breast suffer. Indeed, many a fashionable lady has no milk at all, and is therefore compelled to give up one of her greatest privileges and enjoyments.

A rich mother, who has no work to do, and who lives sumptuously, has frequently no milk; while a poor mother who has to labour for her daily bread, and who has to live sparingly, has generally an abundance of milk. Luxury and disease, toil and health, generally go together hand in hand. The healthy breast of milk then frequently belongs to the poor woman, to the one whom

"The modest wants of every day  
The toil of every day supplies."

What would not some rich mother give for the splendid supply of milk—of healthy, nourish-

ing, life-giving milk—of the poor woman who has to labour for her daily bread!

What is the reason that wealthy ladies so frequently have to forgo nursing their children? The want of occupation! The poor woman who has no lack of occupation, as she has to labour for her daily food, has in consequence the riches of health, though poor in this world's goods—

“For health is riches to the poor.”—*Fenton*.

Bear this in mind, ye wealthy and indolent ladies! Alter your way of living, or take the consequences. Still let the poor woman have the healthy, the chubby, the rosy, the laughing children; and you, ye rich ones, have the unhealthy, the attenuated, the sallow, the dismal little old men and women who are constantly under the doctor's care, and who have to struggle for their very existence! “Employment, which Galen calls ‘Nature's physician,’ is so essential to human happiness, that Indolence is justly considered as the mother of misery.”—*Burton*.

Occupation, then—bustling occupation—real downright work, either in the form of outdoor exercise, or of attending to her household duties—a lady, if she desire to have a good breast of milk, must have, if, in point of fact, she wish to have healthy children. For the Almighty is no respecter of persons. And He has ordained that work shall be the lot of man and of woman too! It is a

blessed thing to be obliged to work. If we do not work, we have all to pay a heavy penalty in the form of loss of both health and happiness. "For work is the grand cure of all the maladies and miseries that ever beset mankind—honest work, which you intend getting done."—*Carlyle's Inaugural Address.*

A mother who is listless and idle, lounging the greater part of every day in an easy chair, or reclining on a sofa, in a room where a breath of air is not allowed to enter, usually makes a miserable and a wretched nurse. She is hysterical, nervous, dyspeptic, emaciated, and dispirited; she has but little milk, and that little of bad quality; her babe is puny, pallid, and unhealthy, and frequently drops into an untimely grave. Occupation, with fresh air and exercise, is indispensable to a mother who is suckling. How true it is that—

"To be employed is to be happy."—*Gray.*

While the converse is equally correct,—To be idle is to be miserable.

Occupation is emphatically a necessity. "Nature has made occupation a necessity; society makes it a duty; habit may make it a pleasure."—*Capelle.*

### "THE PERIODS" DURING SUCKLING.

If a woman have "her periods" during suckling, she is more likely to conceive than when she



has them not. This is important. If she become pregnant, she will have to wean her child before he be old enough to be weaned. Besides, her own constitution, in consequence of her having children too fast, will be injured.

There is a notion abroad, that a mother who has "her periods" during suckling has sweeter, and purer, and more nourishing milk for her child. This is a mistaken idea, for really and truly such a mother's milk is, if anything, less sweet and pure and nourishing.

#### AILMENTS, ETC.

*The Nipple.*—A good nipple is important both to the comfort of the mother and to the well-doing of the child.

One, among many, of the ill effects of stays and of corsets is the *pushing in of the nipples*; sore nipples, and consequent suffering, are the result. Moreover, a mother thus circumstanced may be quite unable to suckle her infant; and then she will be severely punished for her ignorance and folly; she will be compelled to forego the pleasure of nursing her own children, and she will be obliged to delegate to others her greatest privilege! Ladies who never wear stays have the best nipples, and the best developed bosoms; hence such mothers are more likely to make better nurses to their babes. There is no doubt that the pressure

of the stays on the bosom tends both to waste away the gland of the breast, where the milk is secreted, and to cause the nipple either to dwindle or to be pushed in, and thus to sadly interfere with its functions. I should strongly advise every mother who has daughters old enough to profit by it, to bear this fact in mind, and thus to prevent mischief, when mischief may be prevented, by not allowing them to wear stays, which come above the level of the breasts.

*Treatment of very small and drawn-in Nipples.*—The baby ought to suck through the intervention of a nipple shield with rubber nipple. I have known many mothers able to suckle their children with this invention, who otherwise would have been obliged to have weaned them. The above aid, in the generality of instances, will enable the infant to suck with ease. After this has been for a time used, the nipples will be so improved as to render the continuance of it unnecessary. Of course, I do not advise the use of this nipple shield until a fair trial has been given by applying the babe at *once* to the nipple; but if he cannot draw out the nipple, then rather than wean him, it ought, by all means, to be tried.

Remember, as soon as the nipple is sufficiently drawn out, which, in all probability it will be in a few days, you should dispense with the nipple shield. When the infant is not at the breast, apply

a small pad of cotton-wool with a hole in the centre to accommodate the nipple. The pad should be saturated with glycerine. Small, and bad, and sore nipples have thus frequently been drawn out and made good ones; the dress will suffice to keep the pads in their places. These pads are very cooling and healing, and keep off all pressure from the clothes; they will frequently cure sore nipples when other remedies have failed.

*Sore Nipples.*—If a lady, during the latter few months of her pregnancy, were to adopt “means to harden the nipples,” sore nipples, during the period of suckling, would not be so prevalent as they now are.

A sore nipple is frequently produced by the injudicious custom of allowing the child to have the nipple almost constantly in his mouth. “Stated periods for suckling,” as recommended in a previous paragraph, ought to be strictly adopted.

One of the best remedies for a tender nipple is the following powder:—

Take of—Borax, one drachm ;

Powdered Starch, seven drachms ;

Mix.—A pinch of the powder to be frequently applied to the nipple.

The following remedy for a tender nipple is a very good one; it is as follows:—

Take of—Finely powdered Gum-Arabic, half an ounce ;

Powdered Alum, five grains ;

Mix well together to make a powder.—A pinch of it to be frequently applied to the sore nipple.

As there is nothing injurious to the infant in the above powders, they need not be wiped off before applying him to the breast. Indeed, either the one or the other of the powders, the former especially, as it contains borax, is likely to be of service both in preventing and in curing sore mouth in the child.

If the above powders should not have the desired effect—efficacious though they usually are—a lotion, composed of equal parts of glycerine and of brandy, ought to be tried. It should be painted on the nipple by means of a camel's hair brush, every time directly after the babe has been suckled. A piece of old soft cambric or lawn, about the size of the palm of the hand, snipped around to make it fit, ought then to be moistened in the glycerine and the brandy, and should, whenever the child is not at the breast, be applied to each of the sore nipples, and worn until they are cured. These applications will be found of much service and of great comfort, and will act as nipple shields—protecting and healing the nipples. A soft sponge wrung out of warm water should be gently applied to the nipples just before putting the child to the bosom.

Sometimes the pure glycerine, *without the brandy*, painted on the sore nipple, does the most good; if, therefore, the glycerine and brandy do not succeed, the pure glycerine should be tried. There is nothing in the pure glycerine injurious

to the child, it therefore need not be wiped off before applying the child to the breast.

*Cracked and fissured Nipples.*—Sometimes the nipple is sore from having either cracks or fissures upon it. These cracks or fissures may attack any part of the nipple, but are very apt to form where the nipple joins the breast; and, when very severe, an ignorant nurse, who is always fond of dealing in the marvellous, declares that the child has nearly bitten the nipple off!

Now, the best remedy for a *cracked and fissured* nipple is for the infant to suck through the intervention of a nipple shield, until the cracks and fissures are cured; and every time, directly after the babe has been put to the nipple, to apply brandy to the parts affected, or, as I have before recommended, the glycerine and brandy lotion, or pure glycerine. When the child is not at the breast, the pads saturated with glycerine already mentioned should be worn: the dress will keep them in their places.

Another cause of a sore nipple is from the mother, after the babe has been sucking, putting up the nipple wet. She, therefore, *ought always to dry the nipple*, not by rubbing it, but by dabbing it with a soft cambric or lawn handkerchief, or with a piece of soft linen rag or absorbent cotton wool—one or other of which ought always to be at hand—every time directly after the child

has done sucking, and just before applying any of the above powders or lotions to the nipple.

When the nipple is very tender, whenever the child is put to the bosom a mother suffers intense pain. This being the case, she had better, as before recommended, suckle him through the intervention of a shield. But she ought never to use it unless it be absolutely necessary—that is to say, if the nipple be only *slightly* tender, she should not apply it. But there are cases where the nipple is so *very* sore that a mother would have to give up nursing if the nipple shields were not used. These, and very small and drawn-in nipples, are the only cases in which such aid is necessary.

A glass nipple shield with rubber nipple is, for sore and for cracked and for fissured nipples, one of the most useful little contrivances ever invented, and cannot be too strongly recommended. These shields have frequently enabled a mother to suckle her child, who, without such aid, would have been compelled to have weaned him. I think it well to state, that, since I have used these shields, I have had but little difficulty in curing sore nipples; indeed, this most useful little invention has, in the majority of cases, been alone sufficient to effect a cure. Great care should be taken in cleansing the nipple shields, and after cleaning they should be kept in a bowl of clean boiled water.



A nursing mother is sometimes annoyed by the milk *flowing constantly away*, making her wet and uncomfortable. All she can do in such circumstances is to wear a pad of cotton-wool or soft rag, covered with a piece of flannel, over the bosom, which will absorb any overflow, and prevent the milk from running down the abdomen and so making her wet and uncomfortable.

*The Breast.*—A mother ought, before applying the infant to the bosom, to carefully ascertain if there be milk. This may readily be done by squeezing the nipple between the finger and the thumb. If there be *no* milk, the child must only be put to the breast occasionally for a few minutes to stimulate the secretion.

If there be a supply of milk in the breasts, and if still the child will not suck, the medical man's attention ought to be drawn to the fact, in order that he may ascertain whether there is anything wrong with the baby which prevents him from sucking.

If the *bosoms be full and uneasy*, they ought three or four times a day, to be well but gently rubbed with equal parts of olive oil and *eau de Cologne* mixed in a vial. Some nurses rub only with their fingers. The proper way to apply friction is to pour a small quantity of the oil and *eau de Cologne*—first shaking the bottle—into the palm of the hand, the hand being warm,

and then to well rub the breasts, taking care to use the whole of the inside of the hand, and to rub from the edge of the breast towards the nipple. After the bosoms have been well rubbed, each ought to be nicely supported with a large, soft, folded silk handkerchief; the handkerchief must pass *under* each breast and *over* the shoulders, and be tied at the back of the neck, thus acting as a sling. A more convenient form of support for a patient getting about is a well-fitting bust-bodice with shoulder straps.

*Gathered Breasts.*—A healthy woman with a well-developed breast and a *good* nipple scarcely, if ever, has a gathered bosom, if proper attention is paid to cleanliness; it is the delicate, the ill-developed breasted and worse-developed nipped lady that usually suffers from this painful complaint. And why? The evil can generally be traced to girlhood. If she be brought up luxuriously, her health and her breasts are sure to be weakened, and thus to suffer, more especially if the development of the bosoms and nipples has been arrested and interfered with by tight stays and corsets. Why, the nipple is by them drawn in, and retained on a level with the breast—counter-sunk—as though it were of no consequence to her future well-being, as though it were a thing of nought. Tight lacers will have to pay penalties of which they little dream. Oh, the monstrous

folly of such proceedings! When will mothers awake from their lethargy? It is high time that they did so! It is a frightful state of things! But fashion unfortunately blinds the eyes and deafens the ears of its votaries!

A gathered bosom, or "bad breast," as it is sometimes called, is more likely to occur after a *first* confinement and during the *first* month. Great care, therefore, ought to be taken to avoid such a misfortune. A gathered breast is frequently owing to the carelessness of the nurse or mother in not keeping the breasts and the mouth of the child clean during the period of suckling. Too much attention cannot be paid to keeping the breasts clean. Unless both the breasts and the child's mouth are kept scrupulously clean, germs are very likely to get into the nipple and eventually into the breast, with the result that an abscess may be formed.

A sore nipple is another fruitful cause of a gathered breast, as germs may get into the breast through the sore surface.

Another cause of a gathered breast is a mother not having a properly developed nipple—the nipple being so small that the child is not able to take hold of it. The nipple is sometimes level with the other part of the bosom, and in some instances sunk even below the level of the breast, the patient having what is popularly called "no nip-

ple," that is to say, she has no properly developed nipple. Her nipple is not of the least use for any practical purpose whatever, but is rather a source of pain and annoyance. The nipple, in some cases, never develops; it is, from infancy to wifehood, at a perfect standstill. With such a patient, when she becomes a mother, it is quite impossible that she can suckle her child. The child vainly attempts to suck, and a sore nipple very often follows, and inflammation ending in gathering is the result; and to crown all, the child is obliged to be weaned—which is a sad misfortune! But really, in a case of this kind, the child ought never to be put to the breast at all.

*How is a patient to know that she is about to have a gathered bosom?*—There are two forms of gathered breasts; one being of serious and the other of trifling importance. The first, the serious one, consists of a gathering in the deep *structure of the gland* of the breast itself; the latter, of a gathering merely on the *superficial part* of the bosom, and which should be treated, in the same manner as any other *external* gathering, with warm fomentations.

In the *mild* or superficial kind of gathered bosom, the mother must rest the affected breast until it is quite free from all redness or tenderness, and if the breasts get distended the milk must be massaged off; and in the severe form the

baby will not again be able to suckle at that breast, and in all probability will have to be weaned as the other breast will not sufficiently feed it, and the mother's general condition being bad the milk will be of poor quality.

The *important* form of a gathered breast I will now describe. A severe gathered bosom is often ushered in with a shivering attack; the more severe the gathering, the longer is the shivering attack. This shivering is either accompanied or followed by sharp lancinating pains of the bosom. The breast now greatly enlarges, becomes hot, and is *very painful*. The milk in the affected bosom either lessens or entirely disappears. If the child be applied to the breast, which he ought not to be, it gives the mother *intense* pain. She is now feverish and ill; she is hot one minute, and cold the next, feeling as though cold water were circulating with the blood in her veins, she loses her strength and appetite, and is very thirsty; she feels, in point of fact, downright ill.

We sometimes hear of a poor woman suffering dreadfully for months, and of her having a dozen or twenty holes in her bosom! This is generally owing to the doctor not having been sent for *immediately* after the shivering; I therefore cannot too strongly insist, under such circumstances, upon a mother obtaining *prompt* assistance; not only to obviate present suffering,

but, at the same time, to prevent the function of the breast from being injured, which it inevitably, more or less, will be, if the *serious* form of gathering be allowed to take place.

Although it is not always prudent to suckle a babe where, in a previous labour, there has been a severe form of gathered breast yet I have known instances where, after such a gathering in a previous confinement, ladies have been able to nurse their children with comfort to themselves and with benefit to their offspring. Each individual case, therefore, must be judged on its own merits by a medical man skilled in such matters.

When a nursing mother *feels faint*, she ought *immediately* to lie down and take a little nourishment; a cup of tea with the yolk of an egg beaten up in it, or a cup of warm milk, or some beef-tea, any of which will answer the purpose extremely well. Brandy, or any other spirit, I would not recommend, as it would only cause, as soon as the *immediate* effects of the stimulant had gone off, a greater depression to ensue; not only so, but the *frequent* taking of brandy might become a habit—a necessity, and which would be a calamity deeply to be deplored!

A mother is sometimes faint from suckling her child too often, she having him almost constantly at the bosom. She must, of course, expect



as long as she continues this foolish practice, to suffer from faintness.

A nursing mother feeling faint is often an indication that the child is robbing her of her strength, and tells her, in unmistakable language, that she must wean him altogether. Warnings of faintness, during suckling, then, are not to be disregarded.

*Aperients, &c, during Suckling.*—Strong purgatives during this period are highly improper, as they are apt to give pain to the infant, as well as to injure the mother. If it be absolutely necessary to give an aperient, the mildest, such as a dose of castor oil, cascara, or liquorice powder, should be chosen for a single dose, but if the nursing mother is habitually constipated a mild laxative, such as pure liquid paraffin, may be taken twice daily in tablespoon doses. This will ensure an action of the bowels without griping the mother or the infant.

An enema, either of warm water alone, or of gruel, oil, and table salt,\* administered by means of an enema apparatus, or a glycerine enema, is, in such a case, an excellent—indeed, the very best—method of opening the bowels, as it neither interferes with the digestion of the mother nor of the child.

\* Two table-spoonsful of olive oil, two table-spoonsful of table salt, and a pint of warm oatmeal gruel.

When a lady who is nursing is habitually constive, she ought to eat brown instead of white bread. This will, in the majority of cases, enable her to do without an aperient. The brown bread may be made with flour finely ground all one way; or by mixing one part of bran and three parts of fine wheaten flour together, and then making it in the usual way into bread. Treacle, instead of butter, on the brown bread increases its efficacy as an aperient; and *raw* should be substituted for *lump* sugar in her tea.

Stewed prunes, or stewed French plums, or stewed Normandy pippins, are excellent remedies to prevent constipation. The patient ought to eat, every morning, a dozen or fifteen of them. The best way to stew either prunes or French plums, is the following:—Put a pound either of prunes or of French plums, and two table-spoonsful of *raw* sugar, into a brown jar; cover them with water; put them into a slow oven, and stew them for three or four hours. Both stewed rhubarb and stewed pears often act as mild and gentle aperients. Muscatel raisins, eaten at dessert, will oftentimes, without medicine, relieve the bowels.

A Bee-master in *The Times*, or, as he is usually called, *The Times* Bee-master, has satisfactorily proved that honey—pure honey—is most welcome and beneficial to the human economy. He recommends it to be occasionally eaten in lieu of

butter for breakfast. Butter, in some localities, and in some seasons of the year, is far from good and wholesome. One of the qualities of honey, and a very valuable one, is, it frequently acts as an aperient, and thus prevents the necessity of giving opening medicine, which is a very important consideration.

The Germans are in the habit of eating for breakfast and for tea a variety of fruit jams instead of butter with their bread. Now, if the bowels be costive, jam is an excellent substitute for butter; and so is honey. The Scotch, too, scarcely ever sit down either to breakfast or to tea without there being a pot of marmalade on the table. English ladies, in this matter, may well take a leaf out of the books of the Germans and of the Scotch, but in the case of marmalade a good brand must be chosen or the baby will be griped.

A small basinful of gruel, made either with pure Scotch oatmeal, or with the Derbyshire oatmeal, sweetened with *brown* sugar, every night for supper, will often supersede the necessity of giving opening medicine.

A tumblerful of cold water, taken *early* every morning, sometimes effectually relieves the bowels; indeed, few people know the value of cold water as an aperient—it is one of the best we possess, and unlike drug aperients, can never by any pos-

sibility do any harm. I have for many years been a staunch advocate for the plentiful drinking of water—of pure water—more especially for children. I have long discovered that one of the most valuable properties of water is—its aperient qualities; indeed, as far as children are concerned, water is, as a rule, the only aperient they require. I beg to call a mother's special attention to the fact of water being an admirable aperient for children; for if my views in the matter be, to the very letter, carried out, much drugging of children may be saved—to their enduring and inestimable benefit. But the misfortune of it is some mothers are so very fond of quacking their children, that they are never happy but when they are physicking them. The children of such mothers are deeply to be pitied.

Coffee, instead of tea, ought to be substituted for breakfast, as it frequently acts as an aperient, more especially if it be sweetened with brown sugar. I should strongly recommend a patient, in such a case, to eat a great variety of food, and to let the *vegetable* element predominate. *Much* meat encourages constipation. Fruit—Muscatel raisins especially—farinaceous food, coffee, and a variety of vegetables, each and all incite the bowels to do their duty.

Although a nursing mother ought, more especially if she be costive, to take a variety of *well-*

*cooked* vegetables, such as potatoes, broccoli, cauliflower, French beans, spinach, stewed celery, and turnips, she should avoid eating salads and pickles, as they would be likely to affect the babe, and might cause him to suffer from gripings, from pain, and "looseness" of the bowels. Let me again—for it cannot be too urgently insisted upon—strongly advise a nursing mother to use every means in the way of diet, etc., to supersede the necessity of taking opening medicine, as the repetition of aperients injures, and that severely, both herself and child. Moreover, the more opening medicine she swallows, the more she requires; so that if she once gets into the habit of regularly taking aperients, the bowels will not act without them. What a miserable existence, to be always swallowing physic!

If a lady, then during the period of suckling were to take systematic exercise in the open air; to bustle about the house and to attend to her household duties; if she were to drink, the moment she awakes in the morning, a tumblerful of *cold* water; if she were to substitute *brown* bread for *white* bread, and *coffee* for *tea* at breakfast, and *brown* for *white* sugar; if she were to vary her food, both animal and vegetable, and to partake plentifully of sound ripe fruit; and to visit the water-closet daily at one hour, and not be in a hurry but give the bowels plenty of time to act; in short, if she would adopt the above safe and

simple remedies—many of them being Nature's remedies—and which are within the reach of all,—she would not suffer as she now does so much from, costiveness, which is frequently the bane, the misery, and the curse of her existence! But then, to get the bowels into a proper and healthy state, it would take both time and trouble; and how readily can a couple of pills be swallowed, and how quickly they act! How soon they have to be repeated, though, until at length the bowels will not act at all unless goaded into action! The constant swallowing of opening pills, then, makes the bowels stubborn and sluggish, and permanently injures them. The bowels at length will not, without the pills, move at all, and so the pills will become a dire and sometimes even a daily necessity! Oh, the folly and the mischief of such a system!

#### WEANING.

There is an old saying, “That a woman should carry her child nine months, and should suckle him nine months.” It is well known that the first part of the old adage is correct, and experience has proved the latter to be equally so. If a babe be weaned *before* he be nine months old, he loses much which the breast-milk alone can give; if he be suckled *after* he be nine months old, he becomes pallid, flabby, weak, and delicate.



*The time, then, when an infant should be weaned.*—This must depend upon the strength of the child, and upon the health of the parent. Speaking generally, at the *ninth month* is the proper time. If the mother be delicate, it may be found necessary to wean the infant at six months; or if he be weak, or labouring under any disease, it may be well to continue suckling him for ten months; but after that time the breast will do him more harm than good, and will, moreover, injure the mother's health, and may, if she be so predisposed, excite disease.

If he be suckled after he be nine months old, he is generally pale, flabby, unhealthy, and rickety; and the mother is usually nervous, emaciated, and hysterical.

A child nursed beyond nine months is very apt, if he should live, to be knock-kneed, and bow-legged, and weak-ankled—to be narrow-chested and chicken-breasted—to be, in point of fact, a miserable little object. All the symptoms just enumerated are those of rickets, and rickets are damaging and defacing to “the human form divine.” Rickets is a very common complaint among children—nearly all arising from bad management—from hygienic rules not being either understood or followed. There are many degrees of rickets, ranging from bow-legs and knock-knees to a crooked spine—to a humpback! But as I have

entered so fully into the causes and the treatment of rickets in my book—*Advice to a Mother on the Management of her Children*—I beg to refer my fair readers, for further information on the subject, to that volume, because it will be seen that the contents are especially devoted to the management, to the care, and rearing of her children; while this book is intended solely for a wife's own especial benefit—to be her guide and counsellor.

*The manner in which a mother should act when she weans her child.*—She ought, as the word signifies, to do it gradually—that is to say, she should by degrees give him less and less of the breast, and more and more of artificial food, until at last he is fed entirely on artificial food. This is the best way of weaning, as it is less liable to upset the child's digestion than when the weaning is sudden.

The advice given in the following paragraphs is really not of importance, but it has been retained as it is thought that it may interest some readers to acquaint themselves with the methods adopted by our grandmothers. If the mother, during the day-time, cannot resist having the child in the room with her, then I should advise her to make a paste of aloes—that is to say, let her mix a little powdered aloes with a few drops of water, until it be of the consistence of paste—and let her

smear a little of it on the nipple every time just before putting him to the breast; this will be *quite* enough for him; and one or two aloes-applications to the nipple will make him take a disgust to the bosom; and thus the weaning will be accomplished. A mother need not be afraid that the aloes will injure her babe; the *minute* quantity he will swallow will do no harm; for the moment he tastes it, the aloes being extremely bitter, he will splutter it out of his mouth.

Another application for the nipple to effect weaning is wormwood. There are two ways of applying it, either (1) by sprinkling a very small pinch of powdered wormwood on the nipple; or (2) by bathing the nipple with a small quantity of wormwood tea just before applying the babe to it—either the one or the other of these plans will make him take a dislike to the breast, and thus the weaning will be accomplished. Wormwood is excessively bitter and disagreeable, and a slight quantity of it on the nipple will cause an infant to turn away from it in loathing and disgust—the wormwood, the minute quantity he will taste, will not at all injure him. Wormwood was in olden time used for the purpose of weaning—

“ And she was weaned,—I never shall forget it—  
Of all the days of the year upon that day :  
For I had then laid wormwood to my dug [nipple],  
Sitting in the sun under the dove-house wall,

My lord and you were then at Mantua :—  
Nay, I do bear a brain : but, as I said,  
When it did taste the wormwood on the nipple  
Of my dug, and felt it bitter, pretty fool !  
To see it tetchy, and fall out with the dug."

*Shakespeare.*

The best way of "*drying up the milk*" is to sling up each breast by means of a large handkerchief or triangular bandage, which passes over the opposite shoulder, and then to compress the breasts against the chest by means of a broad bandage fastened like a binder. Continuous pressure applied to the breasts is generally sufficient to stop the secretion of milk in a day or two. If in spite of this the milk continues to be formed it is a good plan to apply to each breast a piece of belladonna plaster, the shape and size of the top of a hat, with a round hole the size of a shilling in the middle to admit the nipple.

When the child is once weaned, the breasts ought *not* to be drawn, as the drawing of them would cause them to secrete larger quantities of milk; if, therefore, the bosoms be ever so full or uncomfortable, a mother ought to leave them alone; she should wait patiently, and the milk will gradually diminish, and will at length disappear.

The above plan of "*drying up the milk*" will generally, in five or six days, be successful; but if, at the end of two days, the bosoms still continue full and uncomfortable, the plasters should

be removed, and the breast ought, every four hours, to be well but tenderly rubbed with equal parts of olive oil and of *eau de Cologne*; the nurse supporting the breasts during such friction with her other hand.

Let me impress the above important advice on a nursing mother's mind; it will save a great deal of after suffering and misery.

It may be well to state, that after the child has been weaned, the milk does *not* always *entirely* leave the breasts, not even for weeks, and, in some cases, not even for months. This is not of the slightest consequence, and does not require any treatment.

A mother ought, during the period of weaning, to live abstemiously, and should drink as little as possible. In many cases, it is necessary to work off the milk—to give, every morning, for two or three mornings, mild aperient medicine, such as a Seidlitz powder, or a tea-spoonful of magnesia or a tea-spoonful of Epsom salts in half a tumbler of warm water.

*Symptoms denoting the necessity of weaning.*—A mother sometimes cannot suckle her child, the attempt bringing on a train of symptoms somewhat similar to the following:—Singing in the ears; dimness of sight; aching of the eyeballs; throbbing in the head; nervousness; hysterics; tremblings; faintings; loss of appetite and of flesh; fluttering

and palpitation of the heart; feelings of great exhaustion; indigestion; costiveness; sinking sensations of the stomach; pains in the *left* side; great weakness and dragging pains of the loins, which are usually increased whenever the infant is put to the bosom; pallor of the countenance; shortness of breath; swelling of the ankles.

Every mother who is suffering from suckling does not have the *whole* of the above long catalogue of symptoms! But if she have three or four of the more serious of them, she must not disobey the warnings, but should consult a medical man as to the desirability of weaning at once. Although the babe himself be not old or strong, he can be well brought up by hand.

Remember, then, that if the above warning symptoms be disregarded, undesirable consequences, both to parent and child, may and probably will be the result. It may induce disease in the mother, as consumption; and in consequence of the infant not being able to obtain sufficient or proper nourishment, it may cause him to dwindle and pine away.

If there be, during any period of suckling, a sudden and great diminution of milk in the breasts, the chances are that the mother is again *enceinte*; if so the child should be weaned at once. It is most injurious both to parent and to child for a mother to continue suckling when she is pregnant.



Soon after nine months' nursing "the monthly periods" generally return. This is another warning that the babe ought *immediately* to be weaned. The milk will now lessen both in quantity and in nourishment, and the child in consequence will become delicate and puny, and, every day he is suckled, will be losing instead of gaining ground. I have known many children from protracted suckling, become smaller at twelve months than they were at nine months. And well they might, as after nine months the mother's milk usually does them little good, and thus causes them to dwindle away.

At another time, although the above train of symptoms does not occur, and notwithstanding she may be in perfect health, a mother may not be able to suckle her babe. Such a one usually has very small breasts, and but little milk in them, and if she endeavour to nurse her child, it produces a *violent aching* of the bosom.

*An obstinate sore nipple is sometimes a symptom denoting the necessity for weaning.*—When the nipples, for some time, notwithstanding judicious treatment, persistently continue very sore, it is often an indication that a mother ought to wean her babe. Long continued, obstinate sore nipples frequently occur in delicate women, and speak in language not to be misunderstood that the child, as far as the mother herself is concerned, must be weaned. If

the above advice were more frequently followed than it is, gathered breasts, much suffering, and broken health, would not so frequently prevail as they do now.

If a mother be predisposed to consumption; if she have had spitting of blood; if she be subject to violent palpitation of the heart; if she be labouring under great debility and extreme delicacy of constitution; if she have any of the above complaints or symptoms, she ought to consult her medical attendant, who will almost certainly recommend her not to suckle her child, but it should be brought up on artificial food or delegated to a wet-nurse.

Great care and circumspection are required in the selection of a wet-nurse. Her antecedents should be strictly inquired into; her own health, and that of her babe must be thoroughly investigated; and a blood test should be applied; ages of her own child and that of the foster babe should be compared, as they ought as nearly as possible to be the same. But if a wet-nurse be required, I have in my other work, *Advice to a Mother on the Management of her Children* entered fully into the subject, on the best kind of wet-nurse, and on the right method of selecting one, so that I cannot do better than refer my reader, under the head of "wet-nurse," to that book; a repetition in these pages is needless.

If a nursing mother should, unfortunately, catch scarlatina or small-pox, or any other infectious disease, the child must immediately be weaned, or in all probability the babe himself will catch the disease, and very likely die. The mother's milk, in such a case is poisoned, and, therefore, highly dangerous for a child to suck. I scarcely need say, that the babe must instantly be removed altogether away from the infected house—small-pox and scarlet-fever both being intensely infectious: the younger the child—if he does take the infection—the greater will be his peril. A wet-nurse—if the infant himself be too young to wean—should, as far as she is able, supply the mother's place, or it can be brought up by hand on artificial food.

A mother sometimes suckles her child when she is pregnant. This is highly improper, as it may bring on a miscarriage. It is also prejudicial to her babe, and may make him delicate; indeed, it may be truly said, that an infant so circumstanced is always delicate and unhealthy, and ready, like blighted fruit, to dwindle and die away.

A mother when she is weaning her child should live very abstemiously; she should avoid highly-spiced and rich dishes, and *stimulants of all kinds*; and she should drink very little fluid. Once having weaned her child, she should not again put him to the bosom. If she should be so impru-

ident, she may not only disorder her child and bring on bowel complaint, but she may cause her own breasts to inflame and her nipples to be sore. The less the breasts are meddled with the better; except it be the rubbing of them with the warm camphorated oil; or, as recommended in one of my other books—*Advice to a Mother*—the application of belladonna plaster to each breast.





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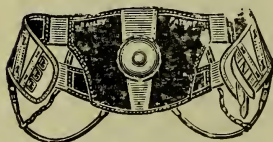
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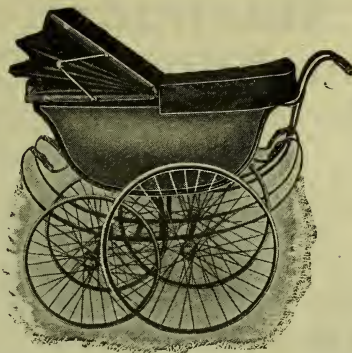
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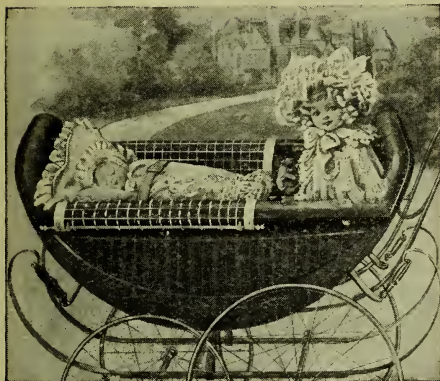
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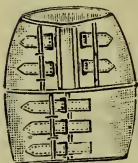


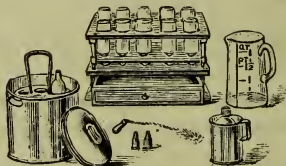
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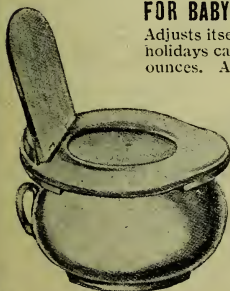
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